STI SpecSeal FIRESTOP PRODUCTS
Specified Technologies Inc.

REQUEST FOR ENGINEERING ASSISTANCE

Instructions: This form must accompany Requests for Engineering Assistance. Fill out the form with as much information as possible. Fax the form to STI Applications Engineering(908.231.8415) or email to **techserv@stifirestop.com**. Additional information may be submitted by attaching a second page. We will respond by phone, fax or email within one business day.

Project Information	Requested By:	Requested For: .....
Date:	Company:	Company: .....
Project Name:	Address:	Address: .....
City, State:	.....	.....
Architect:	Fax: Phone: ( )..... ( ).....	Fax: Phone: ( )..... ( ).....
REQUIRED FIELDS	E Mail:	E Mail: .....

Through Penetration

Concrete Floor	☐	_____in. thick(min)
• Over Steel Deck	☐	_____in. thick(min)
• Hollow Core	☐	_____in. thick(min)
Concrete Block/Wall	☐	_____in. thick(min)
Gypsum Wall	☐	Wood Stud ☐ Steel Stud ☐
Floor Ceiling	☐	Wood Frame ☐ Steel Frame ☐

Opening Size: _____in. **Penetrants:** Single ☐ Multiple ☐

Penetrant Type(s)	Diam.	Insulation Type /Thickness	Annulus

Joint Or Curtain Wall

Floor To Floor ☐ Head Of Wall ☐ Bottom Of Wall ☐
Floor To Wall ☐ Wall To Wall ☐ Curtain Wall ☐

Floor Construction: _____

Wall Construction: _____

CW Framing: Steel ☐ Aluminum ☐
CW Spandrel: Glass ☐ Aluminum ☐ Gypsum ☐ GFRC ☐
Brick ☐ Stone ☐ Precast ☐ Other ☐

Joint/Gap Width: _____in.

Hourly Rating: **1 Hour** ☐ **2 Hour** ☐ **1 & 2 Hour** ☐ **3 Hour** ☐ **4 Hour** ☐ **Other:**_____

Product Desired: _____ **Systems Referenced:**_____

Provide Sketch or Special Conditions/Additional Info: