

PROJECT INFORMATION * Required information

Project name*: _____ Invoice(s) #: _____

Project address*: _____ Project city*: _____ Project state*: _____

Project type* (school, office, hospital, etc.): _____ Start date: _____ Completion date* _____

Project is*: New construction _____ Retrofit / Remodel / Facelift _____

Petersen product 1 installed*: _____ Sq. ft. *: _____ Color*: _____ Gauge: _____ Width: _____

Ribs / Striations?: _____ Curved (y/n): _____ Perforated (y/n): _____ LEED (y/n): _____ Other: _____

Petersen product 2 installed: _____ Sq. ft.: _____ Color: _____ Gauge: _____ Width: _____

Ribs / Striations?: _____ Curved (y/n): _____ Perforated (y/n): _____ LEED (y/n): _____ Other: _____

Petersen product 3 installed: _____ Sq. ft.: _____ Color: _____ Gauge: _____ Width: _____

Ribs / Striations?: _____ Curved (y/n): _____ Perforated (y/n): _____ LEED (y/n): _____ Other: _____

CCM product(s) installed (WIP, ISO, TPO, EPDM, etc.): _____

Alternative materials and/or manufacturers considered: _____

Reason(s) for selecting Petersen products: _____

Project insight (noteworthy challenges, best features, interesting stories/incidents, etc.): _____

PHOTOS

Photos are required to be considered for publication. Photos taken on smartphones are acceptable. Submit photos with this form.

CONTACT INFORMATION

SUBMITTED BY*: _____ City, State: _____

Company: _____ Phone/Email: _____

INSTALLING CONTRACTOR*: _____ City, State: _____

Contact person: _____ Phone/Email: _____

ARCHITECTURE FIRM*: _____ City, State: _____

Contact person: _____ Phone/Email: _____

DISTRIBUTOR*: _____ City, State: _____

Contact person: _____ Phone/Email: _____

GENERAL CONTRACTOR*: _____ City, State: _____

Contact person: _____ Phone/Email: _____