



# Solar Snow Management Quote / Layout Request Form

## Contact Information

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 email: \_\_\_\_\_



PROJECT INFORMATION	
The Below Information is Required:	
Project Name	
Project Location	
Ground Snow Load in PSF or Project Zip Code	
Roof Slope/Pitch	
Module Dimensions (in or mm)	
Module Thickness (in or mm)	
Module Orientation (Indicate Portrait or Landscape)	
Layout of Array - Drawings preferred (modules high x modules wide)	
Color Option (Choose one: Mill Finish or Black Aluminum)	

If you know the Qty's needed, please indicate by writing them in below:


Solar SnowMax-R2 System - Eave Edge of Array

SSM-R2 \_\_\_\_\_

SSM-R2-END \_\_\_\_\_

SNOWMAX-LITE-BAR \_\_\_\_\_

SNOWMAX-CI-69 \_\_\_\_\_



Solar SnowMax-Standard System – Upslope

SSM-BRKT \_\_\_\_\_


SSM-BRKT ASM \_\_\_\_\_

SSM-END BRKT \_\_\_\_\_

SSM-BAR \_\_\_\_\_

SSM-COLOR INSERT-69 \_\_\_\_\_

Other (Please explain) \_\_\_\_\_



SKETCH AREA (IF NEEDED)

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