



**Corporate Office**  
 2141 2nd Ave., SW  
 Cullman, AL 35055  
 (800) 438-1606  
 (800) 438-1626 FAX  
 www.inlandbuildings.com

**QUOTE**  
 DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
 DUE \_\_\_\_/\_\_\_\_/\_\_\_\_  
 **BUYER'S ORDER**  
 DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
 REQ DEL: \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*\* INTERNAL USE ONLY \*\***

Quote Number   
 Date Rec'd: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 DM's Name: \_\_\_\_\_ # \_\_\_\_

**PAGE 1 OF 4**  
 (All 4 pages are required.)  
**\*\* INTERNAL USE ONLY \*\***  
**ORDER NUMBER** \_\_\_\_\_  
 Est'd Ship Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 B  P  D

S  
O  
L  
D  
Contact \_\_\_\_\_  
T Phone: (\_\_\_\_\_) \_\_\_\_\_  
O Fa x: (\_\_\_\_\_) \_\_\_\_\_

S  
H  
I  
P  
City/State \_\_\_\_\_ Zip \_\_\_\_\_  
T County: \_\_\_\_\_ End Use: \_\_\_\_\_  
O

Estimator: \_\_\_\_\_  
 Rep: \_\_\_\_\_  
**CROSS OUT ANY ITEMS THAT DO NOT APPLY.**

**MAIN BUILDING DESCRIPTION**  Sketch Attached  
 Sym.  Single Slope  Unsym. (Sketch req'd)  
**WIDTH** \_\_\_\_\_ (\_\_\_\_ Spans @ \_\_\_\_\_)  
 \_\_\_\_\_ (\_\_\_\_ Spans @ \_\_\_\_\_)  
**LENGTH** \_\_\_\_\_ (\_\_\_\_ Bays @ \_\_\_\_\_)  
 \_\_\_\_\_ (\_\_\_\_ Bays @ \_\_\_\_\_)  
 EAVE HEIGHT (Nominal): \_\_\_\_\_  
 Clear Height: \_\_\_\_\_  
 ROOF SLOPE:  1:12  1/2:12 (Std.)  
 1/4:12  Other: \_\_\_\_\_ :12  
 Endwall Column Spacing:  
 Standard  Special (Sketch Required)  
 Light Gage Endwall:  Left  Right  
 Post and Beam EW:  Left  Right  
 Expandable EW:  Left  Right  
 1/2 Load Non-Exp EW:  Left  Right  
 Masonry/Existing/No EW:  Left  Right

**FRAME DESCRIPTION**  
 Slope Beam (Strt Cols) (Max. Depth \_\_\_\_\_)  
 Rigid Frame  Tapered Columns  Straight Cols  
 Modular Frame w/Tapered Columns  
 Int. Cols:  Pipe (Std)  Weldment  
 Modular Frame w/Strt Cols (Max. Depth \_\_\_\_\_)  
 Int. Cols:  Pipe (Std)  Weldment  
 Other (Specify) \_\_\_\_\_

**DESIGN CODE & LOADS**  
 Building Code: \_\_\_\_\_ Year: \_\_\_\_\_  
 Roof Live Load: \_\_\_\_\_ Psf  
 Live Load Reduction Allowed? \_\_\_\_ Yes \_\_\_\_ No  
 Snow Load: \_\_\_\_\_ Psf Ground \_\_\_\_ Roof  
 Snow Load Exposure: \_\_\_\_\_ Thermal Factor: \_\_\_\_\_  
 Wind Load: \_\_\_\_\_ MPH \_\_\_\_ Psf  
 Wind Load Exposure: \_\_\_\_ A \_\_\_\_ B \_\_\_\_ C \_\_\_\_ D  
 Building Enclosure: \_\_\_\_ Enclosed \_\_\_\_ Open \_\_\_\_ Partial  
 Seismic Load: Ss \_\_\_\_ S1 \_\_\_\_ Aa \_\_\_\_ Av  
 Seismic Zone: \_\_\_\_\_ Site Class: \_\_\_\_\_  
 \*(For other Seismic Loads include additional notes on page 3)  
 Importance Factors: (1= 1.00 Unless Noted)  
 Snow: \_\_\_\_\_ Wind: \_\_\_\_\_ Seismic: \_\_\_\_\_

**MEZZANINE**  
 Width \_\_\_\_\_ Length \_\_\_\_\_  
 Top of Mezz. at \_\_\_\_\_ above F.F.  
 Clear Under Mezz. \_\_\_\_\_ Clear Above Mezz. \_\_\_\_\_  
 Number of Openings (Locate on Sketch) \_\_\_\_\_  
 TYPE OF FLOOR AND LOADS:  Concrete  Wood  
 Live Load \_\_\_\_\_ psf Thickness \_\_\_\_\_ in.  
 Collateral Load \_\_\_\_\_ psf  Other (Specify) \_\_\_\_\_  
 TOTAL Dead Load \_\_\_\_\_ psf (NOT incl. beam wt.)  
 BY INLAND:  
 Capacity-Only  Joists  
 Beams  Deck  
 Columns Gauge \_\_\_\_ (28 GA Std)  
 Concrete Stop Angle Finish \_\_\_\_\_  
 (Uncoated finish Std)

LEAN-TO "A"	LEAN-TO "B"
Width: _____	_____
Length: _____	_____
LS Eave: _____	_____
HS Eave: _____	_____
Slope: _____ :12	_____ :12
Left EW Typ: _____	_____
Right EW Typ: _____	_____
X-Brc Common: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Common Open: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> See Sketch or Notes for Additional Lean-To's	

**ADDITIONAL LOADS**  No Additional Loads  
 Collateral \_\_\_\_\_ psf Misc. \_\_\_\_\_ psf  
 Sprinkler \_\_\_\_\_ psf Other \_\_\_\_\_  
 Ceiling \_\_\_\_\_ psf  
 Lights \_\_\_\_\_ psf  
 Root Top Units (See page 3 for RTU info.)

**CRANE LOADING**  Assumed Info. (Please Verify)  
 Underhung  Top-Running  Monorail  
 No. & Capacity \_\_\_\_\_ tons Span \_\_\_\_\_  
 Wheel Load \_\_\_\_\_ Trolley Wt. \_\_\_\_\_  
 Wheel Spacing \_\_\_\_\_ Service Class \_\_\_\_\_  
 Cab or Pendant Operated \_\_\_\_\_  
 More than one Crane in a bay at the same time?  
 No  Yes (Space between Cranes \_\_\_\_\_)  
 Length of Crane Travel (Runway) \_\_\_\_\_  
 X-bracing allowed at interior columns?  Yes  No  
 Top of Bracket Elevation \_\_\_\_\_

**BRACING** (Diaphragm Std)  
 Diaphragm, Cables, or Rods  
 Wind Trusses  
 Portal Frames  
 Masonry/Tilt-Up Shear Wall (by others)

**MASONRY/TI LT-U PWAI NSCOT**  
 Height \_\_\_\_\_  
 Length \_\_\_\_\_  
 Is Wall Self-Supporting?  
 Yes  
 No (Then L/ \_\_\_\_\_ lateral deflection limit. L/240 UNO)  
 Tie & Flange Brace Cols?  
 Yes  
 No (Cols Unbraced)  
 (Shear Wall-See Bracing)

No. of bays available for X-Bracing:  
 \_\_\_\_\_ # Front SW  
 \_\_\_\_\_ # Rear SW

**STRUCTURAL OPTIONS** None Inset C-Out\* S-Out\*\*  
 Front SW Girts:      
 Rear SW Girts:      
 Left EW Girts:      
 Right EW Girts:      
 \*Must Locate FO's on Sketch for Continuous Girts  
 \*\*-Outset Simple Span Design Condition  
 Girt Spacing:  Standard  
 Special \_\_\_\_\_  
 Base Condition:  Angle (Std.)  Base Girt\*  
 \*-Girt is Not Attached to Columns

BY INLAND: **RAIL NOT BY INLAND**  
 Capacity Only  Hammerhead (Stepped) Cols  
 Brackets  Independent Columns with  
 Runway Beams Lacing and Bracing

**FLANGE BRACING ON COLUMNS**  All Braced (Std)  
 Front S.W. Cols  Unbr. (to \_\_\_\_\_)  
 Rear S.W. Cols  Unbr. (to \_\_\_\_\_)  
 Left E.W. Cols  Unbr. (to \_\_\_\_\_)  
 Right E.W. Cols  Unbr. (to \_\_\_\_\_)

**COLUMN SETTING ELEVATIONS** (Anchor Bolts N.B.I.)  
 All Columns set at Finished Floor.  
 Perimeter Columns set at \_\_\_\_\_  
 Interior Columns set at \_\_\_\_\_  
 Special \_\_\_\_\_  
 Base Plates on Leveling Plate?  Yes  No  
 Base Plates on Grout?  Yes  No  
 Grout Thickness \_\_\_\_\_  
 FOR INFORMATION ONLY. NOT BY INLAND (N.B.I.)

_____ Sets Approval Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N	<b>DRAWINGS</b>	_____ Sets Approval Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N	<b>ENG SEAL</b>	_____ Sets Approval Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N	<b>SALES AND USE TAX</b>
_____ Sets Design Calculations (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N		_____ Sets Design Calculations (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N		_____ Sets Design Calculations (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Add Applicable Tax to Order
_____ Sets Permit Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N		_____ Sets Permit Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N		_____ Sets Permit Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Tax Exemption Certification Attached
_____ Sets Final Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N		_____ Sets Final Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N		_____ Sets Final Drawings (2 Std)	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Direct Pay Permit No. Filed With Inland
								<input type="checkbox"/> LETTER OF CERTIFICATION
								<input type="checkbox"/> Sealed



Corporate Office  
2141 2nd Ave., SW  
Cullman, AL 35055  
(800) 438-1606  
(800) 438-1626 FAX  
www.inlandbuildings.com

**COVER and TRIM REQUIREMENTS**

**STANDARD COLORS Wall**

WH Snowdrift White  
BS Burnished Slate  
CG Classic Green  
RD Scarlet Red  
SO Dover Sand  
HB Hawaiian Blue  
GR Ash Gray

**Roof**

WH Snowdrift White  
BS Burnished Slate  
CG Classic Green  
RD Scarlet Red  
GV Galvalume

(All 4 pages are required.)

ORDER NUMBER \_\_\_\_\_

Quote Number

DM's Name: \_\_\_\_\_

**NOTE: Color Selection is required with order.**

**ROOF COVER**

PANEL TYPE \_\_\_\_\_ PANEL FINISH \_\_\_\_\_

Dyna-Rib DR **Std. Inland Finish**

Standing Seam SS20  Galvalume

Standing Seam SS1 8  20yr Painted Std. Color \_\_\_\_\_

Standing Seam SD24  \_\_\_\_\_

Other \_\_\_\_\_ **Non-Stock Finish\*\***

Not by Inland  Dual-Coat Std. Color\*

\_\_\_\_\_  Dual-Coat Special Color\*

PANEL GAUGE \_\_\_\_\_

26ga\*\* (DR and SD std)  Kynar Std. Color

24ga\*\* (SS Std)  Kynar Special Color

Other \_\_\_\_\_ ga  Other \_\_\_\_\_

PANEL COLOR: \_\_\_\_\_

\* 20 year Roof finish Warranty NOT Available

\*\* Non Stock Gauge/Colors require minimum quantity orders, are additional cost, and require extended lead times for materials.

# - Seamer rental included with roof purchase.

**ROOF ACCESSORIES**

Standard Fasteners

Long Fasteners \_\_\_\_\_ " Insulation Thickness  
(Insulation NOT by Inland Unless Noted Otherwise)

Long Life Fasteners LLF (Req'd w/Any Finish Warranty)

UL90 Rating

Thermal Blocks (SS Roof Only)  Not by Inland

1" Wide Tape Caulk (DR Roof ONLY) 1/2" Std.

Standing Seam Hand Crimper

Touch-Up Paint

Other \_\_\_\_\_

**ROOF WARRANTIES**  None Requested

20 Year Panel

10 Year Material and Finish

20 Year Material and Finish

Other (Specify) \_\_\_\_\_

**TRIM CONDITIONS**

EAVE:  Standard  Chaplet  
Trim Color \_\_\_\_\_

Simple Eave Trim \_\_\_\_\_

Box Eave Trim \_\_\_\_\_

Gutter \_\_\_\_\_

Downspouts \_\_\_\_\_ Qty \_\_\_\_\_

Rake Trim \_\_\_\_\_

Base Trim \_\_\_\_\_

Corner Trim \_\_\_\_\_

Hi/Low Trim \_\_\_\_\_ LF \_\_\_\_\_

Valley Gutter \_\_\_\_\_ LF \_\_\_\_\_ Ga \_\_\_\_\_

Other \_\_\_\_\_

(All trim 26ga in Dual Coat Std. Finish UNO)  
(Valley Gutters 24ga Interior, 18ga Ext. Std.)  
(Counter Flashings to Masonry Not by Inland)

**WALL PANEL**

PANEL TYPE \_\_\_\_\_ PANEL FINISH \_\_\_\_\_

Dyna-Rib (DR) **Std Panel Finish**

Shadow Wall (SW)  Galvalume

RW9  Dual Coat Standard Color\*\*\*

Lok-Wall  Kynar Standard Color\*\*\*

Other \_\_\_\_\_ **Non-Stock Panel Color\*\***

PANEL GAUGE \_\_\_\_\_  Dual Coat Special Color

26ga  Kynar Special Color

24ga  Other \_\_\_\_\_

Other \_\_\_\_\_ ga PANEL COLOR \_\_\_\_\_

\*\*\*-Non-Stock Colors require minimum quantity orders, are additional cost, and require extended lead times for materials.

\*\*\*-26ga Standard. Other gages require minimum quantity orders, are additional cost, and require extended lead times for materials.

**WALL ACCESSORIES**

Standard Fasteners w/o Washers

Long Fasteners \_\_\_\_\_ " Insulation Thickness  
(Insulation NOT by Inland Unless Noted Otherwise)

Long-Life Fasteners w/Washers

Washers on Standard Fasteners

Touch-Up Paint

Other \_\_\_\_\_

**WALL WARRANTIES**  None Requested

20 Year Panel

10 Year Material and Finish

20 Year Material and Finish

Other (Specify) \_\_\_\_\_

**LINER PANEL**

ROOF:  Full  Partial (Specify Location) \_\_\_\_\_

DR  26ga  Galvalume

SW  24ga  Snowdrift-White

RW9  Dual-Coat Color \_\_\_\_\_

RW9 Acoustical\*  Kynar Color \_\_\_\_\_

Other \_\_\_\_\_

**WALL:**  Full Wall  Partial (Specify Location) \_\_\_\_\_

Height FSW: \_\_\_\_\_ Length: \_\_\_\_\_

Height RSW: \_\_\_\_\_ Length: \_\_\_\_\_

Height LEW: \_\_\_\_\_ Length: \_\_\_\_\_

Height REW: \_\_\_\_\_ Length: \_\_\_\_\_

DR  26ga  Galvalume

SW  24ga  Snowdrift-White

RW9  Dual-Coat Color \_\_\_\_\_

RW9 Acoustical\*  Kynar Color \_\_\_\_\_

Other \_\_\_\_\_

\*-RW9 Acoustical available in 26ga White ONLY.

**LINER PANEL ACCESSORIES**

Trim Color \_\_\_\_\_

Cap Trim  Framed Opening Trim

\_\_\_\_\_  Corner Trim as Required

Other \_\_\_\_\_

**EAVE OVERHANG**

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

Soffit Panel  None

Dyna Rib 26 GA

Shadow Wall 26 GA

RW9-36 26 GA

Other \_\_\_\_\_

Panel Color \_\_\_\_\_

Trim Color \_\_\_\_\_

**RAKE OVERHANG**

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

Soffit Panel  None

Dyna Rib 26 GA

Shadow Wall 26 GA

RW9-36 26 GA

Other \_\_\_\_\_

Panel Color \_\_\_\_\_

Trim Color \_\_\_\_\_

**PARAPET**

Not by Inland. For Information Only.

**LOCATION** \_\_\_\_\_ **HT.** \_\_\_\_\_

\_\_\_\_\_ S.W. \_\_\_\_\_

\_\_\_\_\_ S.W. \_\_\_\_\_

\_\_\_\_\_ E.W. \_\_\_\_\_

\_\_\_\_\_ E.W. \_\_\_\_\_

Backside Panel (Dyna Rib 26 GA Galvalume)

Cap Flash Color \_\_\_\_\_

Valley Gutter

None

By Inland

By Others

**CANOPIES (Below Eave)**

Loc. \_\_\_\_\_

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

Clear Ht. \_\_\_\_\_

Slope \_\_\_\_\_:12

Loc. \_\_\_\_\_

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

Clear Ht. \_\_\_\_\_

Slope \_\_\_\_\_:12

Loc. \_\_\_\_\_

\_\_\_\_\_ W x \_\_\_\_\_ L.F.

Clear Ht. \_\_\_\_\_

Slope \_\_\_\_\_:12

Soffit Panel  None

Dyna Rib 26 GA

Shadow Wall 26 GA

RW9 26 GA

Other \_\_\_\_\_

Panel Color \_\_\_\_\_

Trim Color \_\_\_\_\_

**FACADE**

Vertical  \_\_\_\_\_ " :12 Sloped (2.5:12 Std)

Projection \_\_\_\_\_

Height \_\_\_\_\_

Clear Height \_\_\_\_\_

Eave Length \_\_\_\_\_

Rake Length \_\_\_\_\_

Valley Gutter  None  None

By Inland  By Inland

By Others  By Others

Facade Panel  None Soffit Panel  None

Dyna Rib 26 GA  Dyna Rib 26 GA

Shadow Wall 26 GA  Shadow Wall 26 GA

RW9-36 26 GA  RW9-36 26 GA

Other \_\_\_\_\_  Other \_\_\_\_\_

Panel Color \_\_\_\_\_ Panel Color \_\_\_\_\_

Trim Color \_\_\_\_\_ Trim Color \_\_\_\_\_

Other \_\_\_\_\_

Backside Panel (Dyna Rib 26 GA Galvalume)





**Corporate Office**  
 2141 2nd Ave., SW  
 Cullman, AL 35055  
 (800) 438 1606  
 (800) 438-1626 FAX  
 www.inlandbuildings.com

(All 4 pages are required.)

ORDER NUMBER \_\_\_\_\_

Quote Number

DM's Name: \_\_\_\_\_

ALTERNATES (Do NOT include weight and price in Total Net Price shown below.)

	WEIGHT	PRICE	ACCEPT
	#	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
1)			<input type="checkbox"/> Yes <input type="checkbox"/> No
2)			<input type="checkbox"/> Yes <input type="checkbox"/> No
3)			<input type="checkbox"/> Yes <input type="checkbox"/> No
4)			<input type="checkbox"/> Yes <input type="checkbox"/> No
5)			<input type="checkbox"/> Yes <input type="checkbox"/> No
6)			<input type="checkbox"/> Yes <input type="checkbox"/> No

This quote has been prepared in **general accordance** with drawings dated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ as prepared by \_\_\_\_\_ and specifications sections \_\_\_\_\_ dated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ and is based on Seller's normal designs, materials and methods of construction as outlined in Seller's Standard Specifications and Technical and Accessories Guide, which are incorporated herein.

This quote has been prepared in accordance with the attached sketch/es dated \_\_\_\_ / \_\_\_\_ / \_\_\_\_ as prepared by \_\_\_\_\_ and is based on Seller's normal designs, materials and methods of construction as outlined in Seller's Standard Specifications and Technical and Accessories Guide, which are incorporated herein,

**TOTAL NET PRICE F.O.B. PLANT EXCLUDING TAXES, FREIGHT, INSULATION AND ANCHOR BOLTS WILL BE \$** \_\_\_\_\_

Estimated Plant Shipping Weight: \_\_\_\_\_ # Estimated Loads of Freight: \_\_\_\_\_

Freight Terms (Check one):  Collect \$\_\_\_\_\_EST.  Prepaid and Add \$\_\_\_\_\_  Prepaid and Included Above -

This quote prepared by \_\_\_\_\_ on \_\_\_\_ / \_\_\_\_ / \_\_\_\_

The price of this quote will remain valid for 30 days after prepared date.

\*These prices are Seller's prices for the described goods and/or services with all the terms of sale contained on the face and reverse, side of this offer enforceable against the Buyer, including, but not limited to, (i) Seller's exclusive Warranty (Section 7), and (ii) Seller's Disclaimer of Consequential Damages and Other Liabilities (Section 10). If Buyer desires Seller to assume some of these limited or disclaimed matters and risks, Seller will, upon request of Buyer, amend this offer to reflect higher sales prices which reflect such additional exposure.

**BUYER'S ORDER**

The building quoted or ordered herein will be supplied based upon Seller's normal designs, materials and methods of construction, as further explained in Section 13 on the reverse side of page 3. No deviation from such designs, materials and methods of construction may be made except by a written Order Acknowledgement, on Seller's standard form, signed by a duly authorized officer of Seller who is located at the corporate or regional office.

**BUYER**

The undersigned buyer hereby offers to purchase from Inland Buildings the products and the services described above on the terms and provisions stated herein. THIS ORDER IS SUBJECT TO THE ADDITIONAL TERMS AND CONDITIONS APPEARING ON THE REVERSE SIDE OF ALL PAGES HEREOF, AND ANY ATTACHMENTS HERETO, WHICH SHALL LIMIT SELLER'S LIABILITY.

Date- \_\_\_\_ / \_\_\_\_ / \_\_\_\_

BUYER: \_\_\_\_\_  
(PRINT COMPANY NAME)

By: \_\_\_\_\_  
(YOUR SIGNATURE)

Name: \_\_\_\_\_  
(PRINT YOUR NAME)

Title: \_\_\_\_\_  
(PRINT YOUR TITLE)

**ACCEPTANCE OF ORDER BY INLAND**

Buyer's Order contained herein, including all the terms and conditions contained on the reverse side of all pages hereof, are hereby accepted. (Must be signed by a duly authorized officer or executive employee in Inland's corporate or regional office.)

Date- \_\_\_\_ / \_\_\_\_ / \_\_\_\_

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

No modification to this contract may be made except by Buyer's written change order to Seller, together with Seller's written change order acknowledgement from Seller's corporate or regional office, and Buyer's acceptance thereof.