



Request for Firestopping Assistance

Instructions: Please fill out this form with as much information as possible and provide a sketch of the firestopping application in question. Fax the completed form back to the Rectorseal Technical Department © 1-800-452-2824

Construction Details:

'F' Rating _____ Hrs./'T' Rating _____ Hrs.

- Gypsum Wall
- Wood Frame Steel Frame
- Wood Floor Chase Wall
- Concrete/Block Wall _____ Thickness
- Concrete Floor _____ Thickness
 - Over Steel Deck _____ Thickness
 - Hollow-core _____ Thickness

Opening Size: (Shape & Annular Space)

Sleeve - Material & Size _____

Penetrants:

- Single Multiple (No.) _____
- Metallic Non-Metallic Cables
- Cable Tray _____
- Mixed (i.e. cables/pipes) _____
- Insulation (type/thickness) _____
- Other _____

List size, material, schedule, vented or closed (non-metallic), bundle size (cables), gauge (ducts) _____

Sketch Area

Project: _____

Location: _____

Company: _____

Contact: _____

Phone: _____

Fax: _____

Email: _____

Contractor: _____

Distributor: _____

Rep: _____