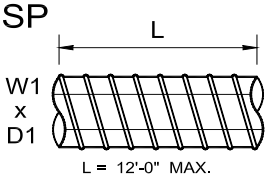
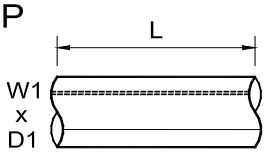
SUPERIOR Duct Fabrication	**Oval Duct** Low ~High Pressure Detail Sheet	Date Det'd: _____ Date Req'd: _____	Sheet _____ Of _____
Tel: 909-620-8565 Fax: 909-620-6374	**Pressure:** Positive ☐ Negative ☐ 1/2" ☐ 1" ☐ 2" ☐ 3" ☐ 4" ☐ 6" ☐ 10" ☐		**SMACNA** ☐ **UMC** ☐
Customer: **Project:** **Material:**	**SPOT**weld ☐ **SEAM**weld ☐ **TIG**weld ☐ **MIG**weld ☐ Liner **Density:** 1 lb. ☐ 1.5 lb. ☐ 3 lb. ☐		**EXPOSED:** Y☐ N☐ **SEAL :** Y ☐ N ☐

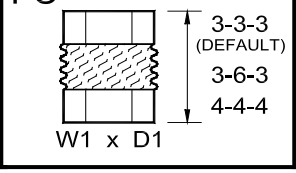
SP



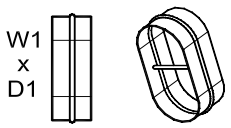
P



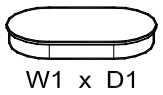
FC



CC



EC



E = Connector Type

	Type	Qty	Tag	Ga.	W1	D1	E1	E2	L	Liner	Remarks
1											
2											
3											
4											
5											
6											
7											
8											
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