

<b>ROUTED SIGN REQUISITION</b>			<b>TO BE COMPLETED BY A.S.</b>	
(Signs to be constructed in full compliance with Forest Service EM-7100-15)				
Office Location Guide				
<b>2. Region</b>	<b>3. Forest</b>	<b>4. District</b>		
<b>7. Name &amp; Address of Ordering Unit (Include Zip Code)</b>			<b>8. Ship To (Include Zip Code)</b>	
<b>9. For Technical Assistance Contact</b>			<b>10. Telephone No.</b>	<b>11. Fax No.</b>
<b>12. Sign Identification</b>		<b>13. Sign Message and Special Instructions</b>	<b>14. Materials &amp; Finishing</b>	
Line Item			<b>Substrate</b>	
Sign No.			<b>Finish &amp; Misc.</b>	
Est. Sq. Ft.			<input type="checkbox"/> MDO Plywood <input type="checkbox"/> Paint (Specify Color) _____ <input type="checkbox"/> Western Red Cedar <input type="checkbox"/> White Oak <input type="checkbox"/> Stain <input type="checkbox"/> HDPE recycled Plastic <input type="checkbox"/> Unfinished <input type="checkbox"/> Wood Plastic Composite <input type="checkbox"/> Artificial Weather <input type="checkbox"/> Fiberglass <input type="checkbox"/> Pre-drill Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> <i>Layout drawing and size to be approved prior to manufacture</i> _____	
Quantity/Unit Price			<b>Legend Treatment</b>	
\$ Line Item Total			<input type="checkbox"/> Natural <input type="checkbox"/> Painted black <input type="checkbox"/> Paint (Specify Color) <input type="checkbox"/> Scorched black _____ <input type="checkbox"/> Other (Specify) _____	
Line Item			<input type="checkbox"/> MDO Plywood <input type="checkbox"/> Paint (Specify Color) _____ <input type="checkbox"/> Western Red Cedar <input type="checkbox"/> White Oak <input type="checkbox"/> Stain <input type="checkbox"/> HDPE recycled Plastic <input type="checkbox"/> Unfinished <input type="checkbox"/> Wood Plastic Composite <input type="checkbox"/> Artificial Weather <input type="checkbox"/> Fiberglass <input type="checkbox"/> Pre-drill Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> <i>Layout drawing and size to be approved prior to manufacture</i> _____	
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Quantity/Unit Price				
\$ Line Item Total				
<b>15. Submitted By (Signature)</b>			<b>16. Title</b>	<b>17. Date</b>
<b>18. Technical Approval By Sign Coordinator (Signature)</b>				<b>19. Date</b>