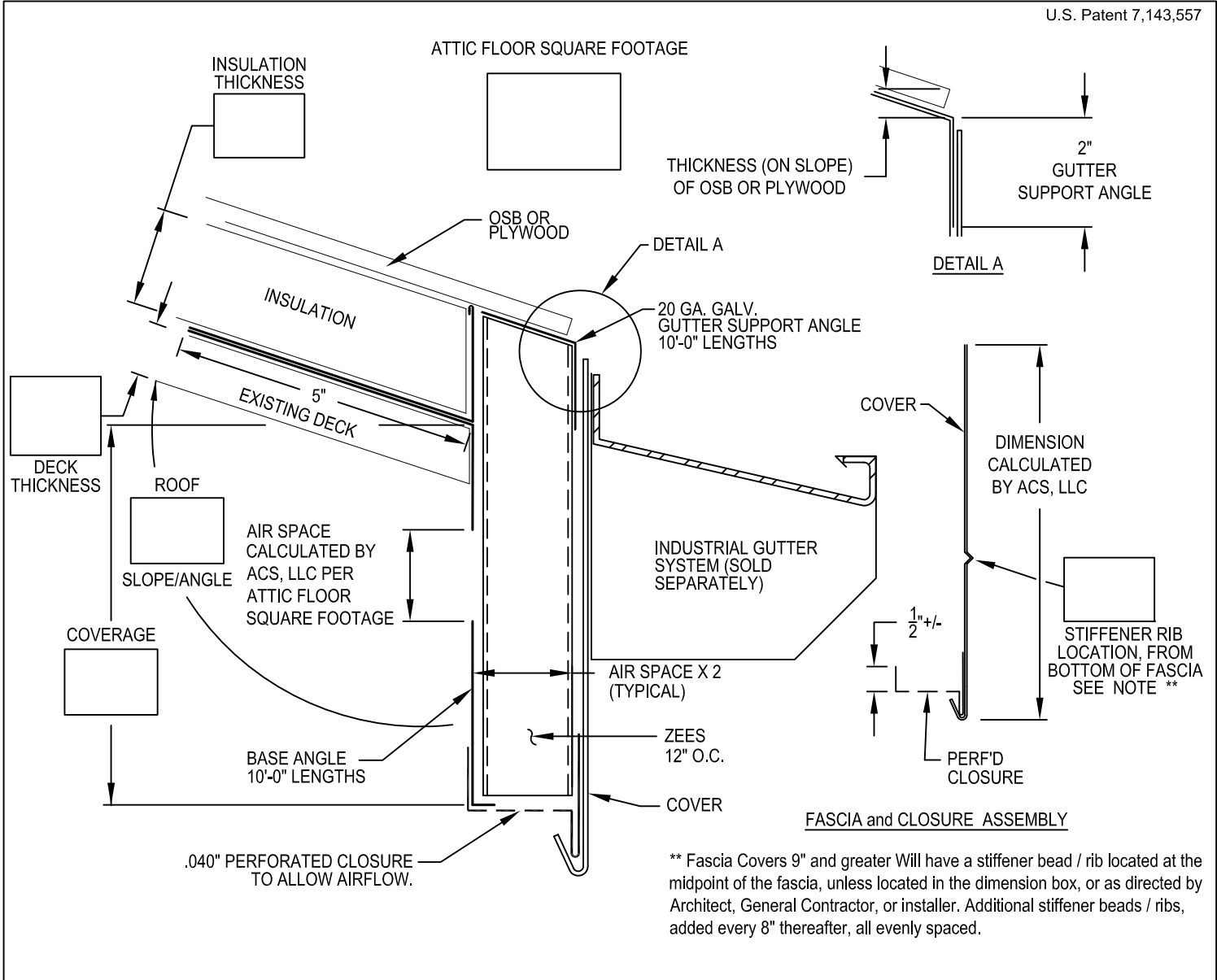


REFERENCE DETAIL:

STRUCTEAVENT SYSTEM NSVA

NON-STRUCTURAL VENTILATED ATTIC

U.S. Patent 7,143,557



All Fasteners as provided by others
 Base / Zee assembly shipped prefabricated
 Fascia and Closures loose shipped.

Fabrication will proceed only after receipt of signed print approval.

Print Approval:


Architect and/or contractor shall verify all dimensions, sizes and quantities. All products to be installed in strict accordance with ACS, LLC printed instructions.

Approved by: _____
 Date: _____

COVER:	
<input type="checkbox"/> 22 Ga. (.81 mm) Galv. Steel	<input type="checkbox"/> 24 Ga. (.65 mm) Galv. Steel*
<input type="checkbox"/> .040" (1.01 mm) Aluminum*	<input type="checkbox"/> .050" (1.27 mm) Aluminum
<input type="checkbox"/> .063" (1.60 mm) Aluminum	<input type="checkbox"/> Other: _____
Color: _____	Finish: _____

PERFORATED CLOSURE:	
<input type="checkbox"/> .040" (1.01 mm) Bone White	<input type="checkbox"/> .040" (1.01 mm) Dark Bronze
<input type="checkbox"/> .040" (1.01 mm) Sandstone	

QUANTITIES:
 _____ Linear Feet (10'-0" (3.05 M Lengths) Include Waste As Required)

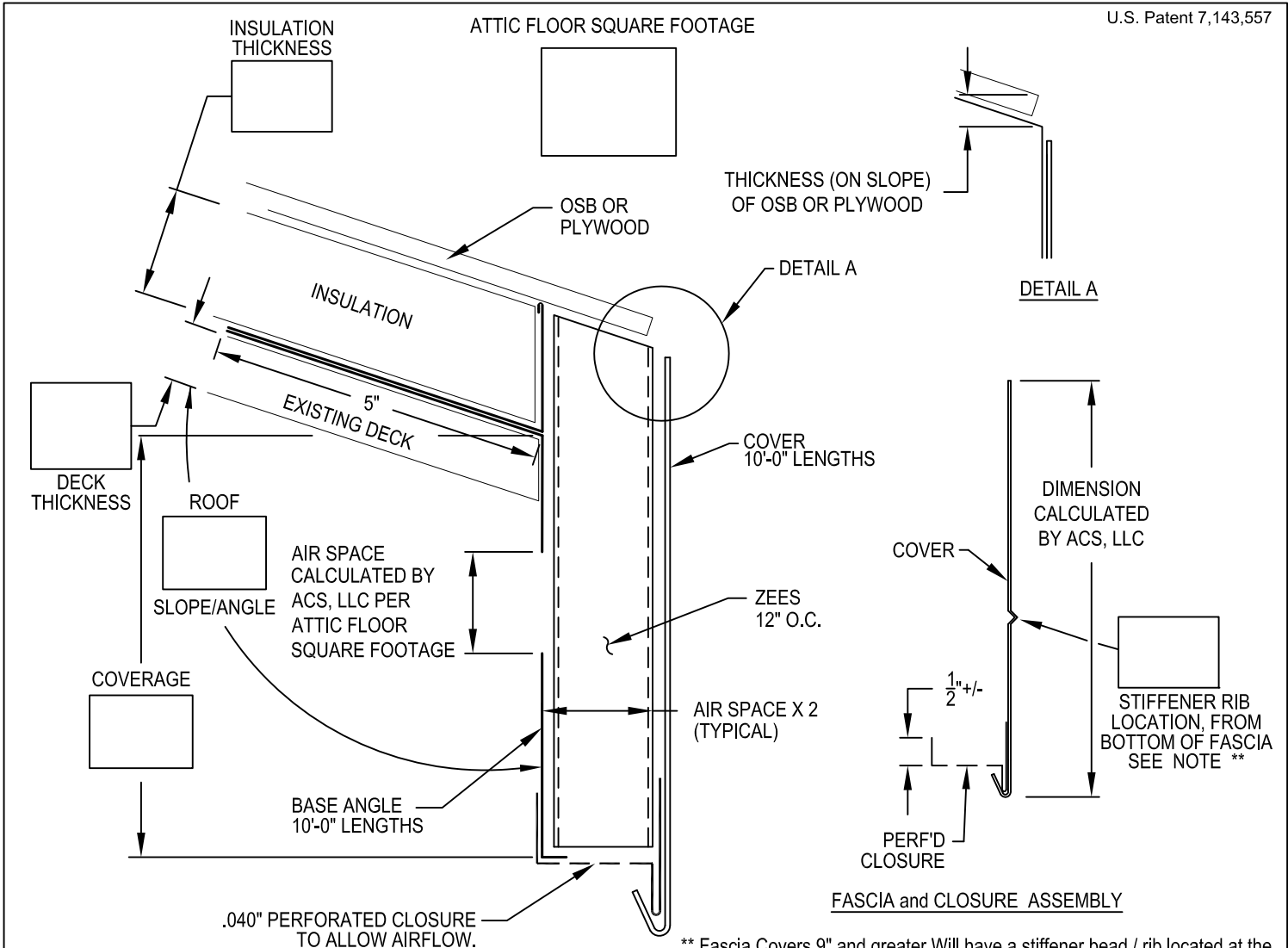
PROJECT:	 ACS, LLC 2550 Five Star Pkwy. Phone : 877-580-9756 Suite 116 Bessemer, AL 35022 www.acs-reps.com	
ARCHITECT:		
CONTRACTOR:	DATE: 6-30-10	SHT.# _____ OF _____
REPRESENTATIVE:	DRN BY: KK	DWG# _____
	CHK BY: HA	

REFERENCE DETAIL:

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U.S. Patent 7,143,557



** Fascia Covers 9" and greater Will have a stiffener bead / rib located at the midpoint of the fascia, unless located in the dimension box, or as directed by Architect, General Contractor, or installer. Additional stiffener beads / ribs, added every 8" thereafter, all evenly spaced.

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PROJECT:	
ARCHITECT:	
CONTRACTOR:	
REPRESENTATIVE:	

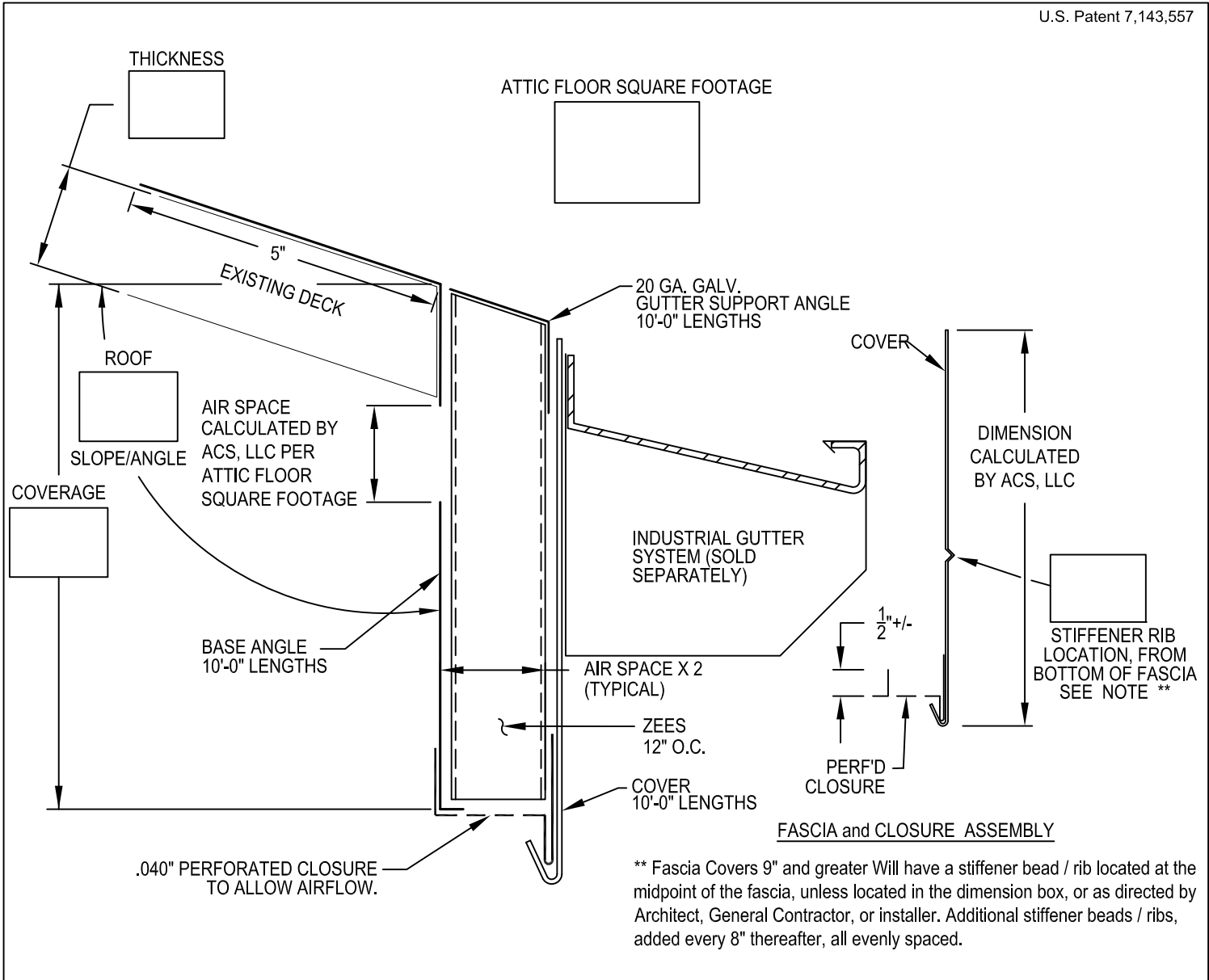
 ACS, LLC 2550 Five Star Pkwy. Phone : 877-580-9756 Suite 116 Bessemer, AL 35022 www.acs-reps.com	DATE: 6-30-10	SHT.# _____ OF _____
	DRN BY: KK	
CHK BY: HA	DWG# _____	X

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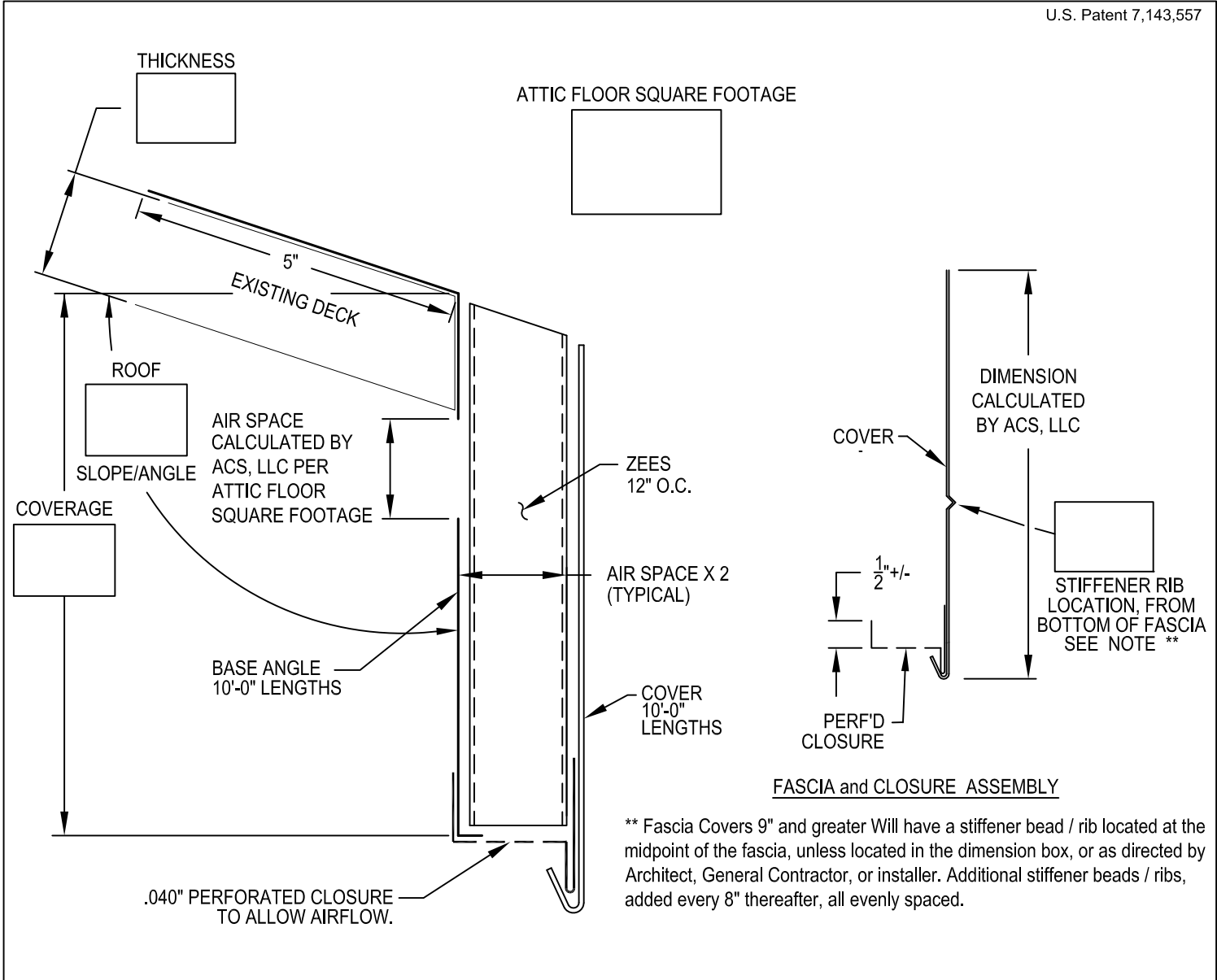
PROJECT:	 ACS, LLC 2550 Five Star Pkwy. Phone : 877-580-9756 Suite 116 Bessemer, AL 35022 www.acs-reps.com		
ARCHITECT:		DATE: 6-30-10	SHT.# _____ OF _____
CONTRACTOR:	DRN BY: KK		
REPRESENTATIVE:	CHK BY: HA	DWG# _____	X

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PROJECT: _____

ARCHITECT: _____

CONTRACTOR: _____

REPRESENTATIVE: _____

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