

Engineering Judgement Request Form Through Penetrations

## Finished Forms Can Be Sent To:

E-Mail: firestopsystems@rwc.com Phone: (760) 705-1240

Submittal Date: \_\_\_\_\_

Installer Name:					
Cell Number:		Fa	ax/Email:		
Project Name and Address:					
Installing Contract Company Name:	or				
1. Assembly TYPE and THICKNESS: (ex. 4-1/2" concrete or 6" steel stud gyp wall)					
2. Penetrating Item(s) TYPE, SIZE, and QTY (ex. 4" cast iron pipe, qty 2):					
3. Are any penetrants insulated? If so specify type of insulation and thickness:					
4. Size and shape of opening (If sleeved, specify diameter and type of sleeve):					
5. Annular Space t	o				
periphery of openi	ng (min				
and max):					
6. Annular space k	oetween				
penetrants (min a	nd max):				
7. Hourly "F" Rati	ng				
8. Additional Ratings Needed (check all that apply): 🛛 L Rating 🔤 W Rating 🔤 T Rating					
9. Notes or Additional Sketch of Condition: (e.g. one side access, bottom side access etc.)					