

Customer Signature: _____

Builder Partner	_____	Date	08/19/09	P.O. #	_____
Location	_____	Retail Customer	_____	SERIAL #	4418C
Order Given By	_____	Order Taken By	_____	Model	GUERDON
Carrier	_____	Date Needed	_____	Series - Model #	2R-2852-02
STANDARD SPEC	2008	Other Options	_____	Financed By	_____
BASE PRICE	_____	Options	\$0	Freight	_____
		Total Price	\$0	Date	08/19/09
				Contact	By _____

GENERAL SPECIFICATIONS			FAMILY ROOM		
1	WALL COVER	T&T SQUARE CORNERS		64	
2	ROLL GOODS	KIT,UTIL,GBA,MBA		65	
3	DRAPES	N/A		66	
4	ROOF	30YR ARCH			
5	RAFTERS	6:12 / 40# /16" F&R EAVES		67	
6	CEILING TILE	ORANGE PEEL		68	
7	FRONT DOOR	36" CRAFTSMAN W/REED GLASS			
8	REAR DOOR	36" 9-LITE STEEL		69	
9	ROOF INSUL.	R - 40		70	
10	FLOOR INSUL.	(OPTIONAL) (MUST SHIP LOOSE)		71	
11	WALL INSUL.	R - 20		72	
12	EXT. WALLS	2" X 6"		73	
13	SIDING	8" LAP SIDING		74	
14	ACCENT SIDING	ABTCO SHAKE @ GABLES		75	
15	OVERHANG	16" FRONT & REAR		76	
16	DOOR CASE	WHITE #356B		77	
17	FULL26'8"X6' PORCH			78	
18	8'6" DORMER			79	
19	CABINET TRIM	CROWN MOULD ACCENT			
20	INT. DOORS	WHT.2 PNL INT DRS W/LEVERS		80	
21	WINDOWS	VINYL LOW - E JAMB & CASE		81	
22	BASE MOULDING	3 1/4" BASE BOARDS T/O		82	
23	WHOLE HOUSE WRAP	- COMMERCIAL		83	
24	CARPET	WESTON HILL		84	
25	FLR DECKING	OSB FLOOR DECKING		85	
26	OPEN TRUSS FLOOR SYSTEM			86	
27	CARPET PAD	7# 7/16" CARPET PAD		87	
28	CEILING HEIGHT	8FT FLAT CEILINGS		88	
29				89	
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Sub Total for this column \$0

Sub Total for this column \$0

MAXIMUM AREA OF GLAZED OPENINGS

PER 2006 ALBERTA BUILDING CODE, TABLE 9.10.15.4

FRONT ELEVATION:
EXPOSED AREA- 617 SQ.FT. W/ 68.34 SQ.FT. GLAZING = 11%

REAR ELEVATION:
EXPOSED AREA- 617 SQ.FT. W/ 39 SQ.FT. GLAZING = 6%

LEFT ELEVATION:
EXPOSED AREA- 295.67 SQ.FT. W/ 6 SQ.FT. GLAZING = 2%

RIGHT ELEVATION:
EXPOSED AREA- 295.67 SQ.FT. W/ 70 SQ.FT. GLAZING = 24%

CALCULATION BASED ON FINISH GRADE AT 914mm (36") BELOW FINISH FLOOR.

ROOF VENTILATION GENERAL NOTES

1. CONTINUOUS PERFORATED SOFFIT PANEL WITH 5 SQ. IN. NET FREE AREA PER LINEAR FOOT USED AT LOW SIDE VENTING. [ALTERNATE]: SOFFIT VENTS WITH 51 SQ. IN. NET FREE AREA PER VENT USED AT LOW SIDE VENTING.
2. CONTINUOUS RIDGE VENT WITH 12.5 SQ. IN. NET FREE AREA PER LINEAR FOOT USED AT HIGH SIDE SOFFIT VENTING.

ROOF VENTILATION GENERAL NOTES

ROOF VENTILATION PER 2006 ALBERTA BUILDING CODE, 9.19.1.2
CROSS VENTILATION AT A RATE OF 1/300
26.83' X 56.0' OUTSIDE, USE INSIDE THERMAL AREA = 25.83' X 55.0' = 1421 SQ. FT.
1421 SQ.FT. / 300 = 4.74 SQ. FT.
4.74 x 144 = 682.56 SQ.IN. REQ'D AT LOW AND HIGH SIDE
REQUIRED VENTING AT HIGH SIDE:
682.56 / 12.5 = 54.6 LINEAR FEET OF VENTED RIDGE MIN.
REQUIRED VENTING AT EAVE:
682.56 / 5 = 136.5 -USE 35 LINEAR FEET OF VENTED SOFFIT
-USE (2) EAVE VENTS



The plans furnished herewith were prepared and issued by the undersigned as a professional engineer under the authority of the Professional Engineers Act, R.S.A. 2000, Chapter 24, Section 24.1(1) and 24.1(2) of the Act. The undersigned is not responsible for any errors or omissions in the plans or for any consequences arising therefrom. The undersigned is not responsible for any consequences arising from the use of the plans for any purpose other than that for which they were prepared.

State: **ALBERTA**

Project Name:
STOCK

Client Name:
WESTERN SHOWCASE
Project Address:
AB, CANADA

Project No:
2R-2852-02 -4418C
Project Engineer:
CH

Project Status:
SUBMITTAL

REVISION SCHEDULE

#	TITLE

Current Revision:

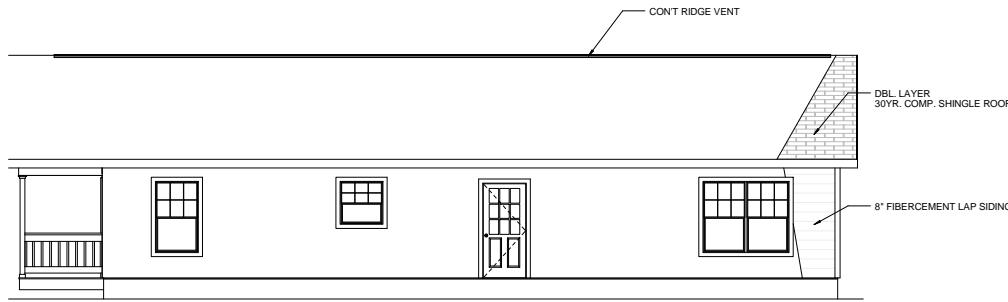
Drafter:
Author

Drawing Title
ELEVATIONS

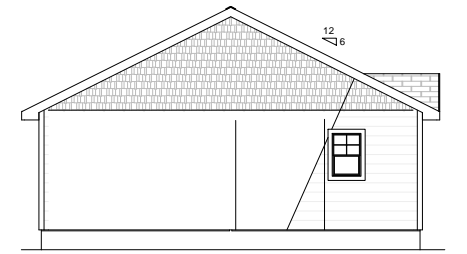
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Scale: **1/4" = 1'-0"**

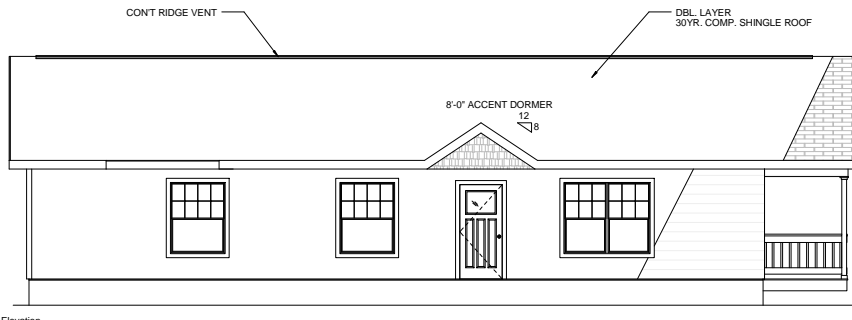
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2 (S) Rear Elevation
1/4" = 1'-0"



3 (S) Left Elevation
1/4" = 1'-0"



1 (S) Front Elevation
1/4" = 1'-0"



4 (S) Right Elevation
1/4" = 1'-0"



GUERDON COLOR SELECTION GUIDE

Enterprises LLC

Builder _____

Serial # _____

Customer _____

Model # _____

Interior Design Options:

Wall Paint _____

Exterior Colors:

Roof Color _____

Body 1st Floor _____

(If Applicable)

Body 2nd Floor _____

Trim Color _____

Accent Color _____

Flooring:

Floor Covering

Color

Merillat Cabinet Options:

Shim Cabinets? Yes No

Main Body Siding Selection: (Main Floor) _____

Body Siding (2nd Floor) _____

Dormer Accent Treatment: (Select One) _____

Location

Special Instructions: _____

Countertop / Self Edge (SE) / Backsplash (BS) / Backsplash Accent (BS ACNT IF OPTIONED)

KIT CTOP _____ SE _____ BS _____

GBA CTOP _____ SE _____ BS _____ BS ACNT _____

MBA CTOP _____ SE _____ BS _____ BS ACNT _____

MBA TUB DECK _____ SE _____ BS _____ BS ACNT _____

ADL BATH CTOP _____ SE _____ BS _____ BS ACNT _____

(If Optioned)

Log/Stone Feature Wall Stone: _____

MBA Shower Tile _____ ACNT _____

GBA Shower Tile _____ ACNT _____

Fireplace _____ Mantle _____

Island Tile or CTOP _____ SE _____

Eat Bar CTOP _____ SE _____

Utility Room CTOP _____ SE _____ BS _____

Special Instructions: _____