



Metal Manufacturing, Inc.
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MKT METAL MFG., INC. SHEET METAL FABRICATION ORDER

RECEIVED BY SHOP: _____ TIME: _____ AM/PM
 ORDER DATE: _____
 REQUIRED DELIVERY DATE: _____

CUSTOMER: _____ JOB NAME: _____ JOB NUMBER: _____

MARKINGS: _____ MATERIAL: GALV. _____ BLACK IRON _____ STAINLESS _____ ALUMINUM _____

LINED: YES ___ NO ___ THICKNESS: _____ DENSITY: _____ CROSSBREAK: YES ___ NO ___ WATERGAUGE: _____

JOINTS: S&D _____ TDC _____ FORMED SLIPS _____ D.M. _____ WELDED _____ TURNING VANES: YES ___ NO ___

COMMENTS: _____

	QUANTITY	SIZE	LENGTH	FINISH	MARK
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