

HEMCO Corporation Ph: 816-796-2900 Fx: 816-796-3333 info@HEMCOCORP.COM

PLAN- A-HOOD SE FUME HOOD

CATALOG #

SHEET 1 OF 2

**CUSTOMER** \_\_\_\_\_  
**CUSTOMER APPROVAL**  APPROVED AS SHOWN  
 APPROVED AS NOTED (PLEASE MARK CORRECTIONS IN RED)  
 NOT APPROVED (PLEASE INDICATE REASON)  
 BY \_\_\_\_\_ DATE \_\_\_\_\_  
 PHONE \_\_\_\_\_  
 FAX \_\_\_\_\_  
 EMAIL \_\_\_\_\_

\_\_\_\_\_  
**CUSTOMER SIGNATURE** \_\_\_\_\_  
 \_\_\_\_\_  
**DATE** \_\_\_\_\_

<input checked="" type="checkbox"/>	<b>OTHER UNIFLOW HOOD</b>	
	CONVENTIONAL/VAV	
	AUXILLIARY AIR	
	DISTILLATION	
	RADIOISOTOPE	
	PERCHLORIC ACID	
	DUAL ENTRY	
	ADA	

<input checked="" type="checkbox"/>	<b>AIR FLOW MONITOR</b>	CAT. NO.
	FLUSH MOUNTING	
	SURFACE MOUNTING	
	OTHER	

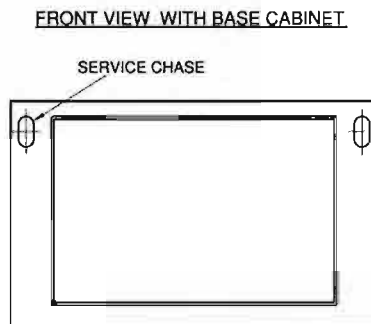
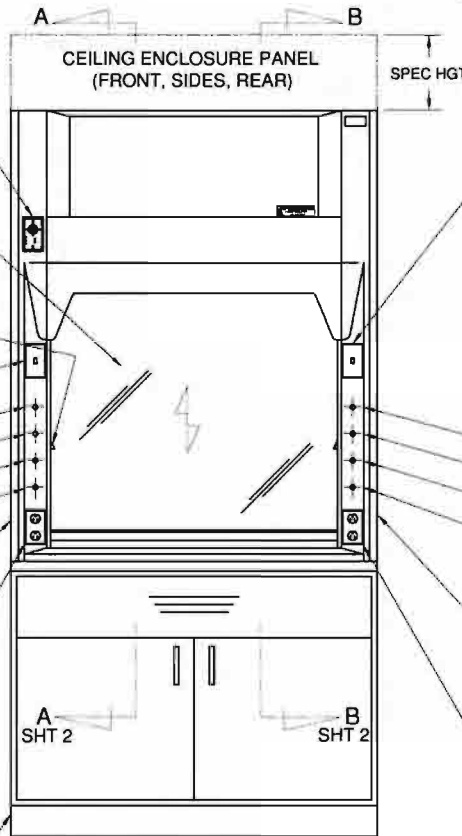
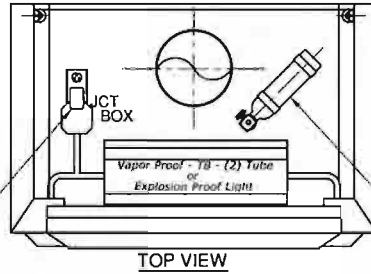
<input checked="" type="checkbox"/>	<b>SASH</b>	CAT. NO.
	VERTICAL MOVING	<i>STD</i>
	HORIZONTAL MOVING	
	COMBINATION H&V	
	<b>SASH STOP</b>	CAT. NO.
	SPECIFY LOCATION	

<input checked="" type="checkbox"/>	<b>SERVICE FIXTURES LT</b>	CAT. NO.
	REMOTE CONTROLLED	
	REMOTE CONTROLLED	
	REMOTE CONTROLLED	
	OTHER	
	SPECIFY AIR,GAS,VAC,C/W OR OTHER	

<input checked="" type="checkbox"/>	<b>ACCESS PANEL</b>	
	INSIDE LOCATION	
	OUTSIDE LOCATION	

<input checked="" type="checkbox"/>	<b>ELECT. SERVICE LT</b>	CAT. NO.
	DUPLEX RECEPT. 125V,15A	
	DUPLEX RECEPT. 125V,20A	
	SIMPLEX RECEPT. 250V	
	DUPLEX GFI 125V,15A	
	DUPLEX GFI 125V,20A	

<input checked="" type="checkbox"/>	<b>CABINETS</b>	CAT. NO.
	SINK CABINET	
	BASE CABINET	
	ACID CABINET	
	FLAMMABLE CABINET	
	BASE TABLE	
	ADA	



<input checked="" type="checkbox"/>	<b>CUSTOMER NOTES</b>	

<input checked="" type="checkbox"/>	<b>FIRE EXTINGUISHER</b>	CAT. NO.
	2.7 LB DRY CHEMICAL	
	5.4 LB DRY CHEMICAL	
	OTHER	

<input checked="" type="checkbox"/>	<b>BLOWER SWITCH</b>	CAT. NO.
	TOGGLE SWITCH 125V,15A	
	TOGGLE SWITCH 125V,15A	
	TOGGLE SWITCH 250V,20A	
	TOGGLE SWITCH W/PILOT	
	MOTOR STARTER SWITCH	

<input checked="" type="checkbox"/>	<b>SERVICE FIXTURES RT</b>	CAT. NO.
	REMOTE CONTROLLED	
	REMOTE CONTROLLED	
	REMOTE CONTROLLED	
	OTHER	
	SPECIFY AIR,GAS,VAC,C/W OR OTHER	

<input checked="" type="checkbox"/>	<b>ACCESS PANEL</b>	
	INSIDE LOCATION	
	OUTSIDE LOCATION	

<input checked="" type="checkbox"/>	<b>ELECT. SERVICE RT</b>	CAT. NO.
	DUPLEX RECEPT. 125V,15A	
	DUPLEX RECEPT. 125V,20A	
	SIMPLEX RECEPT. 250V	
	DUPLEX GFI 125V, 15A	
	DUPLEX GFI 125V, 20A	

<input checked="" type="checkbox"/>	<b>WORKSURFACE</b>	CAT. NO.
	EPOXY RESIN	
	COMPOSITE RESIN	
	PHENOLIC RESIN	
	316 STAINLESS STEEL	
	OTHER	

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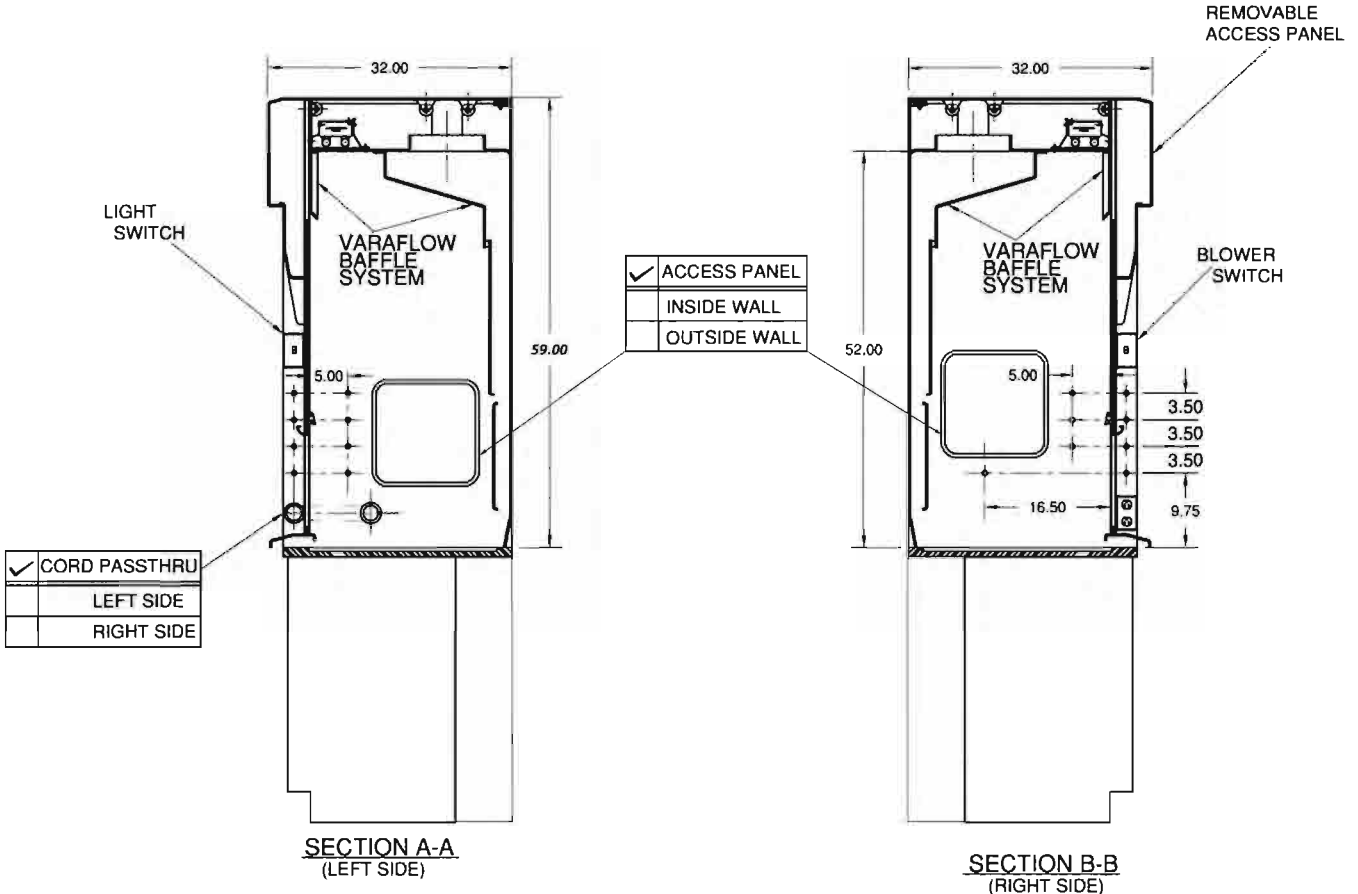
CATALOG #

SHEET 2 OF 2

CUSTOMER \_\_\_\_\_  
 BY \_\_\_\_\_ DATE \_\_\_\_\_  
 PHONE \_\_\_\_\_  
 FAX \_\_\_\_\_  
 EMAIL \_\_\_\_\_

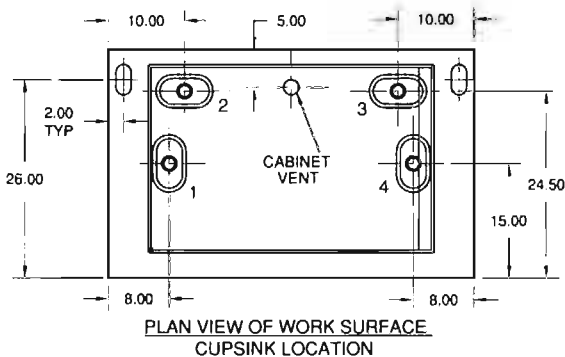
CUSTOMER APPROVAL  APPROVED AS SHOWN  
 APPROVED AS NOTED  
 (PLEASE MARK CORRECTIONS IN RED)  
 NOT APPROVED  
 (PLEASE INDICATE REASON)

CUSTOMER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

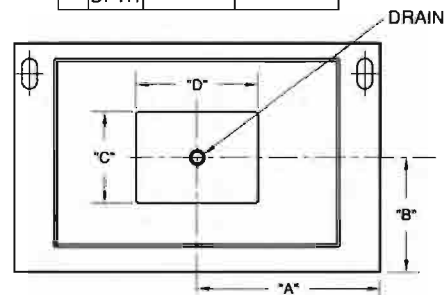


<input checked="" type="checkbox"/>	CUPSINKS	CAT. NO.
	3" X 6" POLYPRO CUPSINK	
	3" X 9" POLYPRO CUPSINK	
	9" DIA ROUND CUPSINK	
	SPECIFY LOCATION 1 2 3 4	

<input checked="" type="checkbox"/>	SINK SIZE/LOC	CAT. NO.
	"A"	
	"B"	
	"C"	
	"D"	
	DPTH	



PLAN VIEW OF WORK SURFACE  
CUPSINK LOCATION



PLAN VIEW OF WORK SURFACE  
SINK SIZE & LOCATION