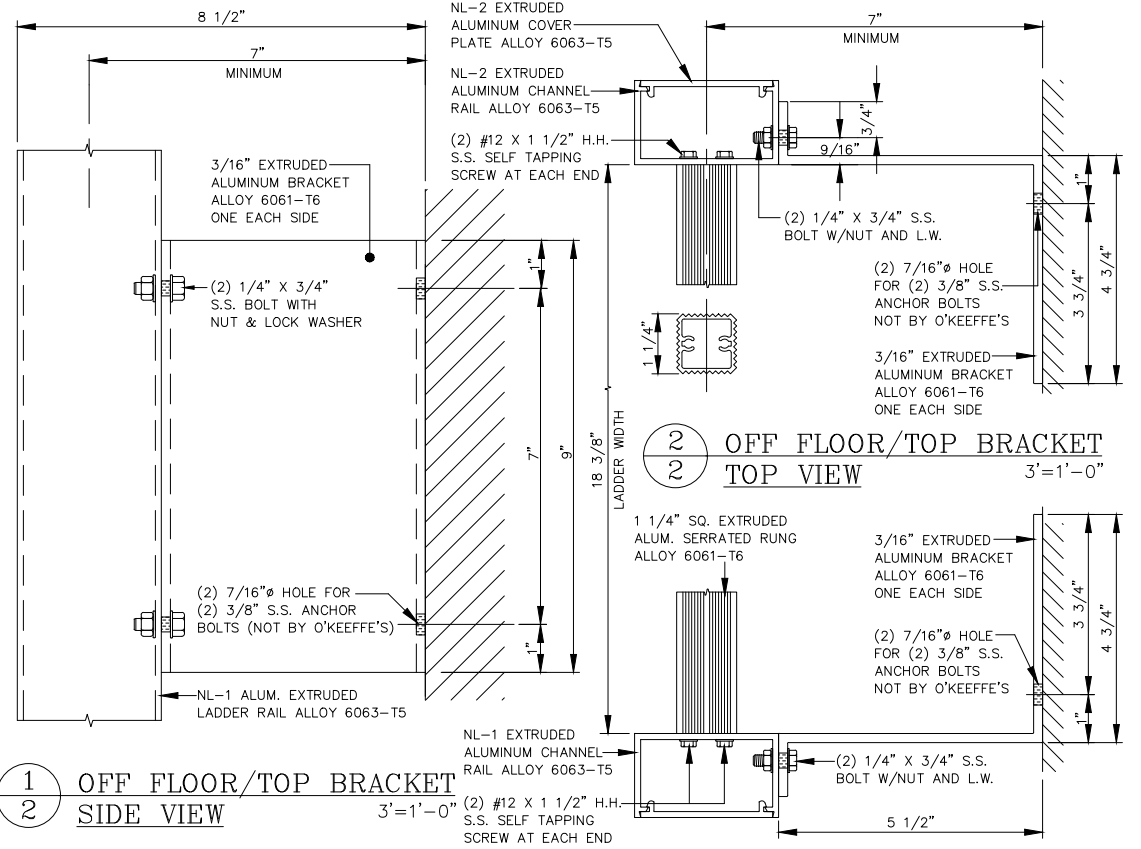


CONTRACTOR TO VERIFY:

(A) _____ OVERALL LADDER HEIGHT
 (B) _____ F.F. TO TOP OF DECKING
 (C) _____ ROOF HATCH BASE HEIGHT
 (D) _____ WALL TO C OF LADDER
 (E) _____ LADDER WIDTH

APPROVED BY: _____
 DATE _____

PLEASE SIGN



O'KEEFFE'S, INC.

100 N. HILL DR. SUITE 12 TEL: (415) 824-4900
 BRISBANE, CA 94005-1010 FAX: (415) 824-5900

**HEAVY DUTY TUBULAR RAIL
 FIXED ACCESS ALUMINUM LADDER MODEL 501**

- | | |
|---|---|
| _____ QUANTITY | <input type="checkbox"/> ALTERNATE BOTTOM SUPPORT |
| <input type="checkbox"/> SECURITY DOOR | <input type="checkbox"/> MILL FINISH |
| <input type="checkbox"/> INTERMEDIATE BRACKET | <input type="checkbox"/> POWDER COATING |
| | <input type="checkbox"/> BRONZE ANODIZED |
| | <input type="checkbox"/> CLEAR ANODIZED |

SALE NO.

DRAWN :

DATE :

SHEET : _____ OF _____