

# HEMCO Corporation ISO 9001-2008

Appendix B	Plan - A - Hood <i>Uniflow SE Fume Hoods</i>	FM 7.2-16
Approved By:		Date:

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

PLAN- A-HOOD SE FUME HOOD      CATALOG #      SHEET 1 OF 2

<b>CUSTOMER</b> BY _____ DATE _____ PHONE _____ FAX _____ EMAIL _____	<b>CUSTOMER APPROVAL</b> <input type="checkbox"/> APPROVED AS SHOWN <input type="checkbox"/> APPROVED AS NOTED (PLEASE MARK CORRECTIONS IN RED) <input type="checkbox"/> NOT APPROVED (PLEASE INDICATE REASON)  <b>CUSTOMER SIGNATURE</b> _____ <b>DATE</b> _____
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<input checked="" type="checkbox"/> OTHER UNIFLOW HOOD
CONVENTIONAL/VAV
AUXILLIARY AIR
DISTILLATION
RADIOISOTOPE
PERCHLORIC ACID
DUAL ENTRY
ADA

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

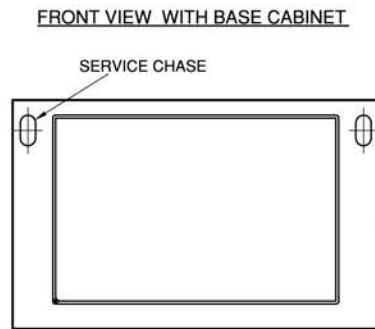
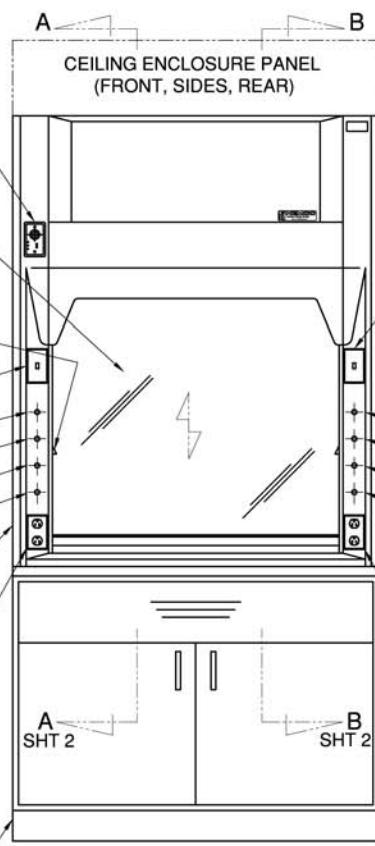
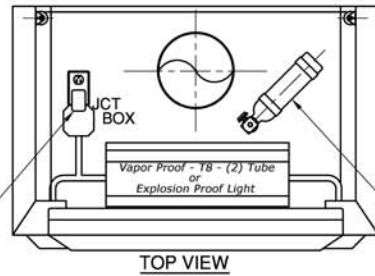
<input checked="" type="checkbox"/> SASH	CAT. NO.
VERTICAL MOVING	STD
HORIZONTAL MOVING	
COMBINATION H&V	
SASH STOP	CAT. NO.
SPECIFY LOCATION	

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

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

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



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

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

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

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

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

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PLAN- A-HOOD SE FUME HOOD	CATALOG #	SHEET 2 OF 2
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**CUSTOMER** \_\_\_\_\_

BY \_\_\_\_\_ DATE \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

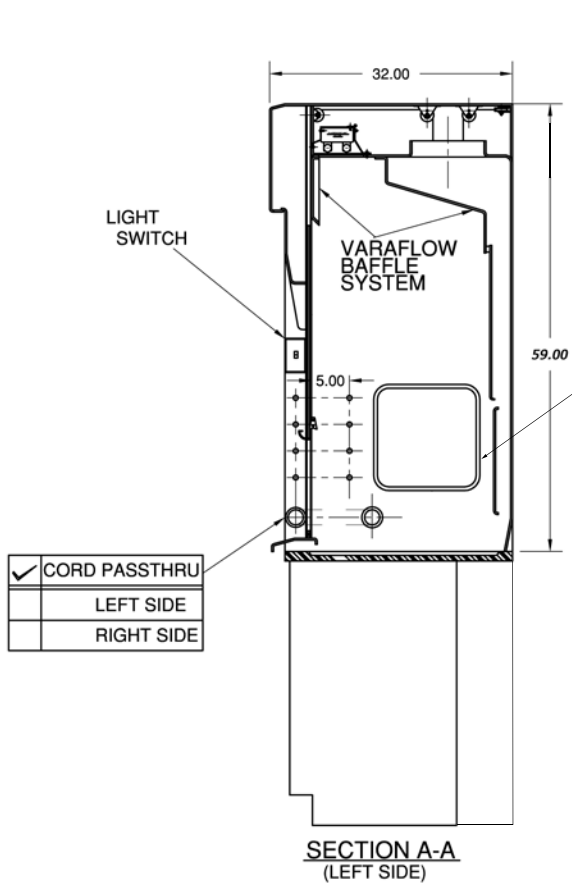
**CUSTOMER APPROVAL**  APPROVED AS SHOWN

APPROVED AS NOTED (PLEASE MARK CORRECTIONS IN RED)

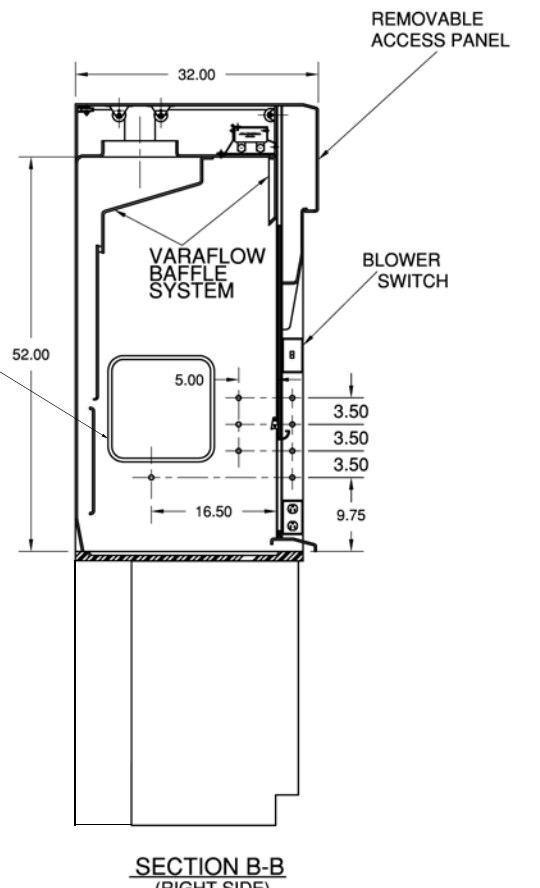
NOT APPROVED (PLEASE INDICATE REASON)

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

\_\_\_\_\_  
**DATE**



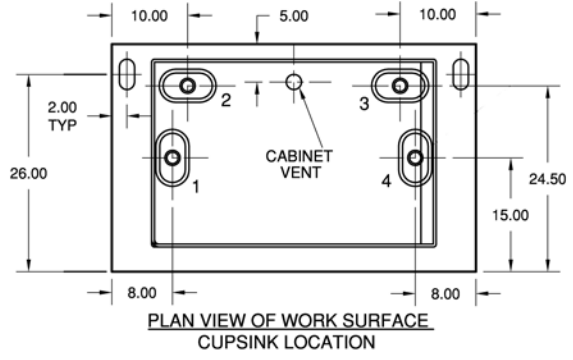
**SECTION A-A**  
(LEFT SIDE)



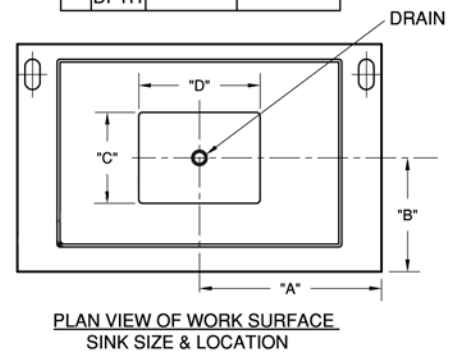
**SECTION B-B**  
(RIGHT SIDE)

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

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



**PLAN VIEW OF WORK SURFACE**  
CUPSINK LOCATION



**PLAN VIEW OF WORK SURFACE**  
SINK SIZE & LOCATION