## **Engineering Work Order**

## **Precast Lifting**



Please email this form to your project engineer.			
Date:			
MB Salesman:	Distributor:		
Contractor/Precaster:	Phone:		
Project Name:	Project Number:		
Job City:	State:		
1. SERVICE			
☐ Precast Panel Lifting			
	utside Slab Thickness:	in.	Deadman
☐ Precast Lifting Utility Box/Tank Lift			
☐ Sign and Seal required State in which sign and seal is required:			
2. CONCRETE INFORMATION			
Concrete Strength at time of lift: psi	Modulus of Rupture:	in.	
Concrete Weight: 150 pcf	Other, specify:	pcf	
3. ANCHOR TYPE			
If you have an anchor preference, please indicate below Rapid Lift Ton Dogbone Other, specify:	n. Leave blank if you do not have a pr Ton ☐ Coil Insert	eference. Dia.	
4. LIFT INFORMATION			
Please indicate the type of lift			
☐ Flat ☐ Edge ☐ Flat Lift with Mid-Air Rotation ☐ Face			
If multiple types of lifts are to be done, please provide a sketch or describe.			
4. LIFT INFORMATION			
Will you be using a spreader bar? ☐ Yes ☐ No Maximum Sling Lengths: ft			

Home of: MeadowBurke