

ROUTED SIGN REQUISITION			TO BE COMPLETED BY A.S.	
(Signs to be constructed in full compliance with Forest Service EM-7100-15)			1. Purchase Order Number	
Office Location Guide			5. Appropriation Code	6. Required Delivery Date
2. Region	3. Forest	4. District		
7. Name & Address of Ordering Unit (Include Zip Code)			8. Ship To (Include Zip Code)	
9. For Technical Assistance Contact			10. Telephone No.	11. Fax No.
12. Sign Identification	13. Sign Message and Special Instructions		14. Materials & Finishing	
Line Item			Substrate	Finish & Misc.
Sign No.			<input type="checkbox"/> MDO Plywood	<input type="checkbox"/> Paint (Specify Color) _____
Est. Sq. Ft.			<input type="checkbox"/> Cedar	<input type="checkbox"/> Stain _____
Quantity/Unit Price			<input type="checkbox"/> Oak (Specify) _____	<input type="checkbox"/> Unfinished
\$ Line Item Total			<input type="checkbox"/> Plastic	<input type="checkbox"/> Artificial Weather
			<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Pre-drill Holes
			<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> <i>Layout drawing and size to be approved prior to manufacture</i>
			Legend Treatment	
			<input type="checkbox"/> Natural	<input type="checkbox"/> Ink Blackened
			<input type="checkbox"/> Paint (Specify Color) _____	<input type="checkbox"/> Scorched
				<input type="checkbox"/> Other (Specify) _____
Line Item			<input type="checkbox"/> MDO Plywood	<input type="checkbox"/> Paint (Specify Color) _____
Sign No.			<input type="checkbox"/> Cedar	<input type="checkbox"/> Stain _____
Est. Sq. Ft.			<input type="checkbox"/> Oak (Specify) _____	<input type="checkbox"/> Unfinished
Quantity/Unit Price			<input type="checkbox"/> Plastic	<input type="checkbox"/> Artificial Weather
\$ Line Item Total			<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Pre-drill Holes
			<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> <i>Layout drawing and size to be approved prior to manufacture</i>
			Legend Treatment	
			<input type="checkbox"/> Natural	<input type="checkbox"/> Ink Blackened
			<input type="checkbox"/> Paint (Specify Color) _____	<input type="checkbox"/> Scorched
				<input type="checkbox"/> Other (Specify) _____
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			<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> <i>Layout drawing and size to be approved prior to manufacture</i>
			Legend Treatment	
			<input type="checkbox"/> Natural	<input type="checkbox"/> Ink Blackened
			<input type="checkbox"/> Paint (Specify Color) _____	<input type="checkbox"/> Scorched
				<input type="checkbox"/> Other (Specify) _____
15. Submitted By (Signature)			16. Title	17. Date
18. Technical Approval By Sign Coordinator (Signature)			19. Date	