<table>
<thead>
<tr>
<th>PIECE ID</th>
<th>QUANTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>BABS12</td>
<td></td>
</tr>
</tbody>
</table>

COLOR: __________

CCS TOLERANCE: ±.125

SHOP DRAWING(S) STATUS (CHECK ONE)

RESUBMIT FOR APPROVAL: ☐
APPROVED W/ MODIFICATIONS: ☐
APPROVED: ☐

________________      __________
SIGNATURE             DATE

________________
PRINTED NAME

DATE: __________
PROJECT: __________
CONTRACTOR: __________

CUSTOM CAST STONE
ARCHITECTURAL  COMMERCIAL  RESIDENTIAL
734 East 108th Street, Westfield, IN 46074
Business: (317)896-1700  Fax: (317)896-1701 Toll Free: (888) 776-9900
Web: www.customcaststone.com  Email: custconcaststone@yahoo.com

DRAWN BY: __________
CHECKED BY: __________
SHEET NO. CS1
1 OF 1