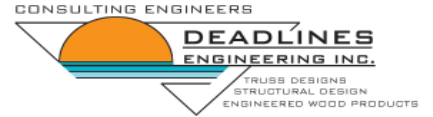


Repair Form for I-Joist with a Notched Flange



Customer information

Date _____

Name: _____

Company: _____

Phone #: _____

Fax #: _____

Job Name: _____

Location: _____

I-Joist Information

Joist Manufacturer & Series _____

Depth: _____

Loading

Joist Type: Commercial / Residential

O.C. Spacing: _____

Live Load _____ PSF

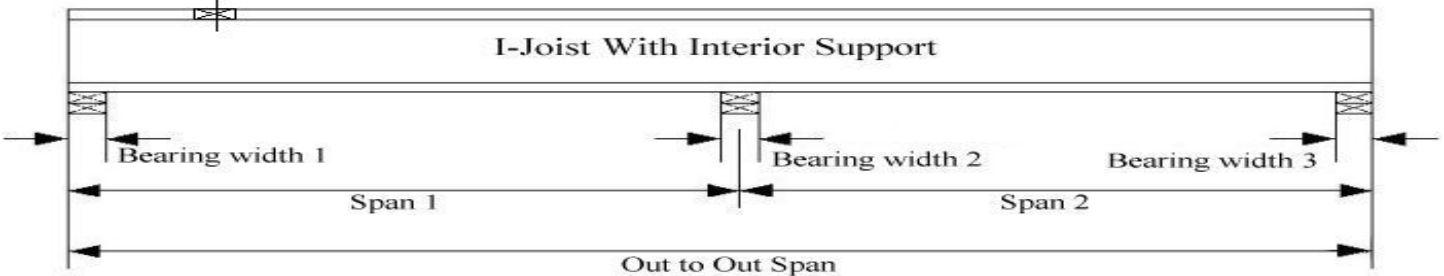
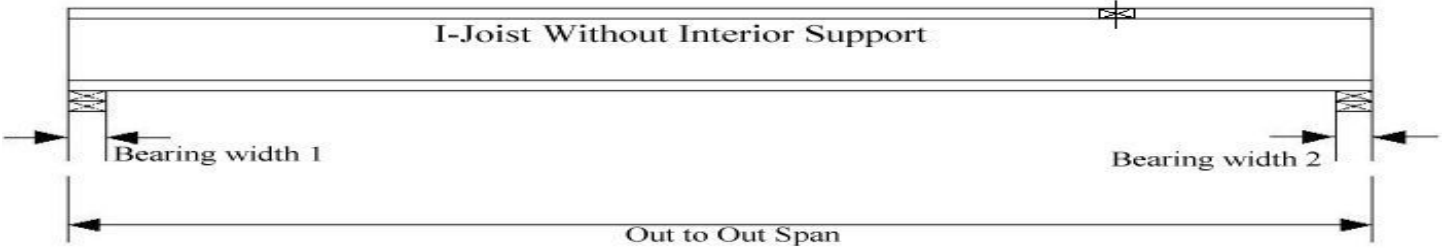
Application: Floor / Roof

(Center to center distance between joist)

Dead Load _____ PSF

If Roof Slope ____/12

If Roof Snow Loading _____ PSF



Out to Out Span: _____

Bearing Width 1: _____

Span 1: _____

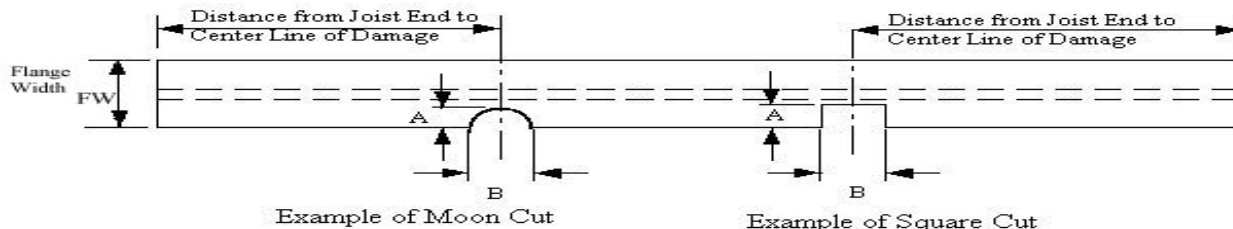
Bearing Width 2: _____

Span 2: _____

Bearing Width 3: _____ (if applies)

Damage Information

Top View



Notch Location: Top Flange / Bottom Flange / Both

Distance from joist end to centerline of Notch: _____

Notch Type: _____

Notch Depth (A) _____

Notch Width (B): _____

Flange Width _____

When Completed You Can Fax This Form to 805-771-9673 Or Email to designs@fixmyjoist.com