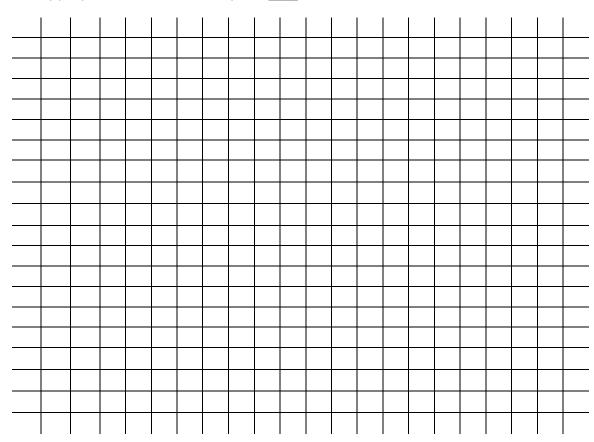
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CS II Office Furniture Design Questionnaire

Please provide us with a layout with dimensions or make a sketch using the grid below:

(Make sure to include building features i.e. Doorways, Corridors, Electrical Outlets, Data Ports, Raceways, Lights, Heating Ducts etc.)

How many people need to work in this space? _____



Workspace Requirements

How much workspace is required for each user?								
User #1:	User #5:	User #9:						
User #2:	User #6:	User #10:						
User #3:	User #7:	User #11:						
User #4:	User #8:	User #12:						
Modular Clustering Preferences:								
Cluster of fo	ourCluster of Six	Cluster of Eight	Straight Row					

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Required Features (What does each user require to perform their task?)

Desking:					
QTY.	USER#	QTY.		USER#	
Credenza		Peninsula	Freestanding Table		
Bowfront		Peninsula	Post Style		
Bridge*					
*Mod	lesty panel for brid	ge? None 2/3 Full			
Return		Team Tab	ole		
J Table		P Table			
Rectangu	lar				
Height Ad	ljustable Bridge	6" Confer	ence Overhang		
Filing & Stora	ge:				
Desk mount		or	Freestanding (Pedes	tals will require mobile kit)	
QTY.	USER#		QTY.	USER #	
Box/Box/	File		Box/Box/File		
File/File			File/File		
Lateral Fil	le		Lateral File		
Media File	e		Media File		
Keyed Alike Tu	umblers: Yes / N	0			
Overhead Sto	orage:				
Fli	· ·	ft CloseOptional F	f Overhead	Гask Lighting	
•			Pencil Drawer: Yes	/ No How many?	
CPU Storage					
	olly many in all?	CPU Under How many in a	r Surface Holder all?		
Privacy Panel	s				
	omplete Privacy specified, we will o	Combo/Sto	·		
Add to sketch	or describe in writ	ing			

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Additional Work Areas			
Printer	Meeting	Copier	Training
Collating	Conference	High Density Filin	gMailroom
Network Products	i		
For assistance please call us T	oll Free 1-877-933-723	8	
Other Details			
Are there any other special re	quirements that should	d be known prior to desigr	ning this application?
Contact Information			
*Name:			
*Company/Organization:			
*Address 1:			
Address 2:			
*City:	*(State:*Zip:	
*Telephone:	Ema	ail:	
Fax:			
When is your intended install	ation date?		
Please indicate how you woul	d like to receive your q	uote and drawing: Fax	or Email

Please email **Completed Form** & **Floor Plan** to <u>design@dewofficefurniture.com</u> or fax to 480-219-5309.

Please look for a response in 48 – 72 business hours. Thanks! Questions? Toll Free 1-877-933-7238