Slant/Fin®
100 Forest Drive, Greenvale, NY 11548
516-484-2600

RESIDENTIAL BASEBOARD INSTALLATION SCHEDULE

PAGE_____ OF_____

JOB NAME:	DATE:	BUILDING NO.
JOB ADDRESS:	FIGURED BY:	
WHOLESALER:		FLOOR NO.
CONTRACTOR:		

TYPE OF BASEBOARD SELECTED

ROOM OR APT. #	COMPLETE PACKAGE											COVER ONLY											ELEMENT								FILLER SLEEVE		INSIDE CORNER	OUTSIDE CORNER	VALVE COVER		CENTER VALVE COVER	WALL TRIM		END CAP		OTHER ITEMS & NOTES
	2	3	3½	4	5	6	7	8	10	12	14	2	3	3½	4	5	6	7	8	10	12	14	2	3	3½	4	5	6	7	8	7"	14"			L	R		L	R	L	R	
TOTALS																																										TOTAL FOOTAGE COMPLETE PKG.
	2	3	3½	4	5	6	7	8	10	12	14	2	3	3½	4	5	6	7	8	10	12	14	2	3	3½	4	5	6	7	8	7"	14"			L	R		L	R	L	R	TOTAL FOOTAGE COVER ONLY PKG.
	COMPLETE PACKAGE											COVER ONLY											ELEMENT								FILLER SLEEVE		INSIDE CORNER	OUTSIDE CORNER	VALVE COVER		CENTER VALVE COVER	WALL TRIM		END CAP		ELEMENT

KEY

REC–RIGHT END CAP
LEC–LEFT END CAP
RWT–RIGHT WALL TRIM
LWT–LEFT WALL TRIM

IC–INSIDE CORNER
OC–OUTSIDE CORNER
FS–FILLER SLEEVE
SP–SPLICE PLATE

CVC–CENTER VALVE COVER
RVC–RIGHT VALVE COVER
LVC–LEFT VALVE COVER

- **LVS**–LEFT VALVE COVER-SLOTTED
- **RVS**–RIGHT VALVE COVER-SLOTTED
- **CIRCLE VC WHEN SLOTTED**