



Bid Spec Sheet

Commercial Tubing

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Company Name _____

Phone _____ Fax _____ Email _____

City _____ State _____ Zip _____

Contact _____ Rep _____

Pieces	O.D.Size & Gauge	Hot-Rolled or Galvanized	Length	Desired Ship Date

Special Considerations
ASTM Spec_____
ID Flash_____
Chemistry_____

Tolerances
Length_____
Ovality_____
End Cond._____
Straightness_____

Comments/Special Instructions
End Use_____

