WÄRME-, KÄLTE-, SCHALL- UND BRANDSCHUTZ

MODULARES LUFTKANALSYSTEM

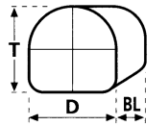
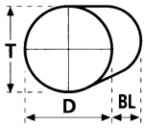
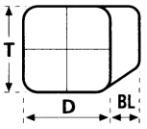
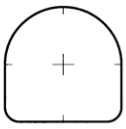
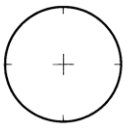
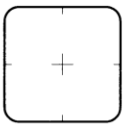
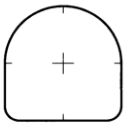
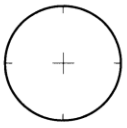
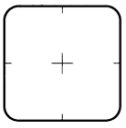
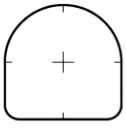
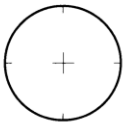
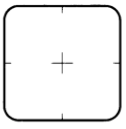
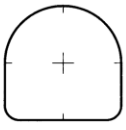
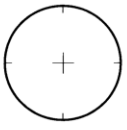
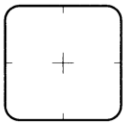
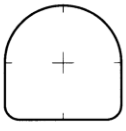
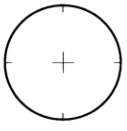
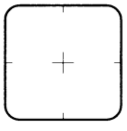
dolfenberg ISOLIERUNGEN GMBH

Firma:	Objekt / Lieferanschrift:
Für die Richtigkeit der Maße/Unterschrift:	Objektleiter:

Aufmaß für Kappen

☐ **Anfrage** ☐ **Auftrag** Datum:

Blechqualität: ☐ verz. Stahlblech ☐ ☐ Alu seewasserfest _____

Blechdicke ☐ _____ mm ☐ Lieferstandard ☐ _____

Pos.	**Bitte geben Sie in der Zeichnung die Teiligkeit an!**			Durchmesser mm **D**	gesamte Tiefe mm **T**	Baulänge mm **BL**	Stück
	Armaturenkappe Form B	Flanschkappe Form A	Kofferkappe Form D