

**Engineering Judgment Request Form
Joints**

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Date: _____ Hilti Initiator's name: _____
Cell #: _____ Fax/Email: _____
Project Name: _____
Contractor: _____ Contact: _____
Phone #: _____ Fax/Email: _____

1. **TYPE** and **THICKNESS** of wall or curtain wall (include stud size for gypsum wall):

2. **TYPE** and **THICKNESS** of floor or floor/ceiling assembly (include flute size): _____

3. Type of joint system (circle one):
Floor to Floor Floor-to-wall Top- of-Wall Wall- to-Wall Curtain Wall
4. Orientation of wall to floor/ceiling assembly (perpendicular/parallel): _____

5. Maximum width of joint: _____
6. Fire rating (hrs.): _____
7. Comments (suggested product):



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