

PACO MOMENT FRAME

Design Criteria Worksheet

FAX WORKSHEET to (310) 608-1112 or EMAIL to sales@pacosteel.com

MOMENT FRAME DESIGN CRITERIA			PROJECT INFORMATION	
1. WALL WIDTH/THICKNESS (inches) per Architectural Drawing	5 1/2"		PROJECT NAME:	
2. FRAME HEIGHT (feet) See Elevation			LOCATION (City/State/ZIP) :	
H_{1st} (Actual First Floor Height from Top of Concrete Slab to Top of Plate)			CONTACT PERSON:	
H_{2nd} (from Top of Plate to Top of Plate - if applicable)			COMPANY NAME :	
H_{3rd} (from Top of Plate to Top of Plate - if applicable)			ADDRESS:	
3. CLEAR OPENING (feet) See PACO Moment Frame Elevations			PHONE NO. ()	FAX NO. ()
CS_{in} (from Inside of Nailer to Inside of Nailer)			EMAIL ADDRESS :	DATE :
CS_{out} (from Outside of Nailer to Outside Of Nailer)				
Center-to-Center of Column (feet)				
4. WL_1, WL_2, WL_{ROOF} = Wind Lateral Load (Kips) ASD	$WL_1 =$	$WL_R =$		
*Provide this value if 2nd level exist	$WL_2 =$			
5. EL_1, EL_2, EL_{ROOF} = Seismic Lateral Load (Kips) ASD	$EL_1 =$	$EL_R =$		
*Provide this value if 2nd level exist	$EL_2 =$			
6. W_1, W_2, W_{ROOF} = Gravity Load (Plf) ASD	$W_{DL_1} =$	$W_{LL_1} =$		
*Provide this value if 2nd level exist	$W_{DL_2} =$	$W_{LL_2} =$		
	$W_{DL_R} =$	$W_{LL_R} =$		
7. SL = Snow Load (Plf) If applicable	$SL =$			
ADDITIONAL INFORMATION				
8. Required Building Code and Load Combination(s)				
9. Required Response Modification Coefficient: $R =$				
10. Deflection Amplification Factor : $C_d =$				
Notes :				
1. Please complete one sheet per application.				
2. Specify the total quantity of identical frames. TOTAL =				
Other Requirements/Comments :				



MOMENT FRAME ELEVATION