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|-----------|------------|
| Customer: | |
| Address: | |
| Tel: | Fax: |
| Delivery | Collection |

| | |
|---------------|-----------|
| Del. Address: | |
| Reference: | |
| Order Date | Date Req: |
| Quote No. | Page of |

| | |
|----------------------|--|
| Outer Frame Type | Feat. / Bev. |
| Door Style | |
| Width | |
| Height Incl. Cill | |
| Door Slab Outer Col. | |
| O/Frame Outer Col. | |
| Door Slab Inner Col. | |
| O/Frame Inner Col. | |
| Threshold Type | |
| Cill Type | |
| Drainage | |
| Glass Design | |
| Backing Glass | |
| Door Opening | In / Out |
| Hinged (VFO) | Left / Right |
| Lock Type | Std. Multipoint / Stable Heritage Slam Shut / Key Only Lock |
| Handle Type | |
| Furniture Colour | |
| L/plate & Position | |
| Knocker Type | |
| Spy Hole Viewer | |
| Stable Door | |

Drawing if necessary

Additional Information

Please ensure you are familiar with our product and specifications. Assistance will be required on all deliveries.
 I authorise you to proceed with manufacture of the above products, which represent the final manufacturing measurements.

Signed