

Date _____

Customer _____
 Telephone _____
 Fax _____
 Email _____
 Contact Name _____

Job Name / PO Number _____
 Representative _____
 Contact Name _____

Quote Order Residential Non-Residential Custom Please Specify

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS TO ENSURE AN ACCURATE QUOTE

1 Diameter

Classic 38mm (1 1/2") Progressive 38mm (1 1/2")
 Classic 50mm (2") Progressive 50mm (2")

2 Finishes

<p>Classic</p> <p><input type="checkbox"/> Polished <input type="checkbox"/> Polished Brass Tint <input type="checkbox"/> Polished Copper Tint <input type="checkbox"/> Polished Rose Tint <input type="checkbox"/> Polished Bronze Tint <input type="checkbox"/> Waxed <input type="checkbox"/> Custom _____</p>	<p>Progressive</p> <p><input type="checkbox"/> Brushed Stainless <input type="checkbox"/> Cloud (M-S-G) <input type="checkbox"/> Brushed Brass Tint <input type="checkbox"/> Dove (M-S-G) <input type="checkbox"/> Brushed Copper Tint <input type="checkbox"/> Millstone (M-S-G) <input type="checkbox"/> Brushed Rose Tint <input type="checkbox"/> Slate (M-S-G) <input type="checkbox"/> Brushed Bronze Tint <input type="checkbox"/> Brushed Carbon Tint</p>	<p>Coat Option <input type="checkbox"/> Matte (M) <input type="checkbox"/> Satin (S) <input type="checkbox"/> Gloss (G)</p>
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3 Finials

<p><input type="checkbox"/> Classic Stud Quantity _____ <input type="checkbox"/> Classic Large Stud Quantity _____ <input type="checkbox"/> Classic Ball Quantity _____ <input type="checkbox"/> Classic Button Stud Quantity _____</p>	<p><input type="checkbox"/> Progressive Stud Quantity _____ <input type="checkbox"/> Progressive Disc Quantity _____ <input type="checkbox"/> Progressive Ball Quantity _____ <input type="checkbox"/> Progressive Contrast stud Quantity _____</p>
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4 Brackets

<p><input type="checkbox"/> Single - Side Quantity _____ Projection <input type="checkbox"/> 100mm (4") <input type="checkbox"/> Custom _____ <input type="checkbox"/> Double - Side Quantity _____ <input type="checkbox"/> Flush Ceiling Quantity _____</p>	<p><input type="checkbox"/> Single - Mid Quantity _____ <input type="checkbox"/> Double - Mid Quantity _____ <input type="checkbox"/> Flush Ceiling - Joining Quantity _____</p>	<p><input type="checkbox"/> Single - Joining Quantity _____ <input type="checkbox"/> Double - Joining Quantity _____</p>
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5 Coverpole Lengths & Information

<p>A Straight Pole Length Please give measurements of Pole length only, see diagram A. If this is not possible please follow diagram B.</p> <p> <input type="checkbox"/> Pole Length <input type="checkbox"/> Pole & Finial Length</p> <p><input type="checkbox"/> Bay Pole - Please fill in Bay Form</p>	<p>B Stacking Location Please specify how the curtain will be stacked.</p> <p> <input type="checkbox"/> Single Stack <input type="checkbox"/> Pair Stack</p>	<p>C Gliding Options</p> <p><input type="checkbox"/> Rollers <input type="checkbox"/> Ripplefold® Rollers - 80% Fullness <input type="checkbox"/> Ripplefold® Rollers - 100% Fullness <input type="checkbox"/> Ripplefold® Rollers - 120% Fullness</p>
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6 Curtain Information

A Total Curtain Weight _____
 Please fill in questions B-E, if this information is not available

These questions allow us to calculate curtain weight, if not noted above.

<p>B Heading</p> <p><input type="checkbox"/> Standard <input type="checkbox"/> Wave <input type="checkbox"/> Ripplefold</p>	<p>C Curtain Drop _____</p>	<p>E Fabric</p> <p><input type="checkbox"/> Light - Cotton / Linen <input type="checkbox"/> Medium - Cotton / Linen <input type="checkbox"/> Heavy - Velvet / Wool</p>	<p>F Lining</p> <p><input type="checkbox"/> None <input type="checkbox"/> Lined <input type="checkbox"/> Interlined</p>
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7 Motor

<p>A Motor</p> <p><input type="checkbox"/> D105 <input type="checkbox"/> D145 <input type="checkbox"/> D175</p>	<p>B Location</p> <p><input type="checkbox"/> Left <input type="checkbox"/> Right</p>	<p>C Transformer Required</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>D Control</p> <p><input type="checkbox"/> Standalone (supplied with wireless dongle and pico remote) <input type="checkbox"/> Home automation (complete control by others)</p>
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8 Order Declaration I confirm the given information & measurements are correct and on this basis wish to proceed with an ORDER.

Signed _____ Date _____