

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 Square H27mm (1 1/16") Round 30mm (1 3/16") Round 50mm (2")

2 Finishes

<input type="checkbox"/> Alabaster (M-S-G)	<input type="checkbox"/> Dusk (M-S-G)	<input type="checkbox"/> Granite (M-S-G)	<input type="checkbox"/> Slate (M-S-G)	<input type="checkbox"/> Flint (M-S-G)
<input type="checkbox"/> Barley (M-S-G)	<input type="checkbox"/> Dove (M-S-G)	<input type="checkbox"/> Millstone (M-S-G)	<input type="checkbox"/> Clay (M-S-G)	<input type="checkbox"/> Cocoa (M-S-G)
<input type="checkbox"/> Cloud (M-S-G)	<input type="checkbox"/> Ceramic (M-S-G)	<input type="checkbox"/> Bone (M-S-G)	<input type="checkbox"/> Cream (M-S-G)	<input type="checkbox"/> Parchment (M-S-G)
<input type="checkbox"/> Damson (M-S-G)	<input type="checkbox"/> Moss (M-S-G)	<input type="checkbox"/> Smoke (M-S-G)	<input type="checkbox"/> Frame Grey (M-S-G)	<input type="checkbox"/> Raven (M-S-G)
<input type="checkbox"/> Platinum (S-G)	<input type="checkbox"/> Champagne (S-G)	<input type="checkbox"/> Gold (S-G)	<input type="checkbox"/> Cognac (S-G)	<input type="checkbox"/> Gunmetal (S-G)
<input type="checkbox"/> Pewter (S-G)	<input type="checkbox"/> Antique Brass (S-G)	<input type="checkbox"/> Bronzed (S-G)	<input type="checkbox"/> Natural Silver	<input type="checkbox"/> Custom Please specify _____

Finial & bracket only finishes Polished Nickel

Pole only finishes Bright Aluminium

Coat Option Matte (M) Satin (S) Gloss (G)

3 Finials

<input type="checkbox"/> Flush Cap	Quantity _____	<input type="checkbox"/> Flush Stud	Quantity _____	<input type="checkbox"/> Stud	Quantity _____
<input type="checkbox"/> Disc	Quantity _____	<input type="checkbox"/> Pebble	Quantity _____	<input type="checkbox"/> Ball	Quantity _____
<input type="checkbox"/> Halo	Quantity _____	<input type="checkbox"/> Globe	Quantity _____	<input type="checkbox"/> Crystal Globe	Quantity _____
<input type="checkbox"/> Templar	Quantity _____	<input type="checkbox"/> Crystal Templar	Quantity _____	<input type="checkbox"/> Charm	

4 Brackets

<input type="checkbox"/> Single - Side	Quantity _____	<input type="checkbox"/> Single - Mid	Quantity _____	<input type="checkbox"/> Single - Recess	Quantity _____
Projection <input type="checkbox"/> 60mm (2 3/8") <input type="checkbox"/> 100mm (4") <input type="checkbox"/> Custom _____					
<input type="checkbox"/> Double - Side	Quantity _____	<input type="checkbox"/> Double - Mid	Quantity _____	<input type="checkbox"/> Ceiling - Standoff	Quantity _____
<input type="checkbox"/> Ceiling - Light Duty	Quantity _____	<input type="checkbox"/> Ceiling - Heavy Duty	Quantity _____	<input type="checkbox"/> Adjustable - Ceiling	Quantity _____
<input type="checkbox"/> Adjustable - Side	Quantity _____	<input type="checkbox"/> Adjustable - Mid	Quantity _____		

5 Pole Lengths & Information

A Straight Pole Length _____
Please give measurements of Pole length only, see diagram A. If this is not possible please follow diagram B.

B Stacking Location Please specify how the curtain will be stacked.

C Gliding Options

<input type="checkbox"/> Pole Length	<input type="checkbox"/> Pole & Finial Length	<input type="checkbox"/> Single Stack	<input type="checkbox"/> Pair Stack	<input type="checkbox"/> Gliders	<input type="checkbox"/> Wave® Gliders	<input type="checkbox"/> Wave® Rollers	<input type="checkbox"/> Wave® header tape & hooks required
--------------------------------------	---	---------------------------------------	-------------------------------------	----------------------------------	--	--	---

Bay Pole - Please fill in Bay Form

6 Curtain Information

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

B Heading Standard Wave

C Curtain Drop _____

E Fabric Light - Cotton / Linen Medium - Cotton / Linen Heavy - Velvet / Wool

F Lining None Lined Interlined

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

7 Cord

A Location Single Cord - Left Side Single Cord - Right Side Twin Cord - Both Sides

B Pole fitting height _____
Cord will be supplied looping 1.5M (59") off the floor. If pole fitting height is not supplied the cord will automatically be supplied at 1.0M (39") drop. This information must be supplied for us to comply with **BO EN 13120:2009+A12014** cord safety standard.

C Cord Colour Black White

D Cord Retainer _____
A Cord Retainer is supplied as standard to comply with **BO EN 13120:2009+A12014** this will be supplied in the same finish as the system unless advised otherwise

8 Order Declaration I confirm the given information & measurements are correct and on this basis wish to proceed with an ORDER.

Signed _____ Date _____