

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 19mm (3/4") 25mm (1") 38mm (1 1/2") 50mm (2")


2 Finishes Polished Natural Steel Brass Toned Matte Brass Toned Bronzed (SATIN)
 Oil Rubbed Waxed Flint (SATIN) Custom Please specify _____

3 Finials


<input type="checkbox"/> Standard Stud	Quantity _____	<input type="checkbox"/> Pebble	Quantity _____	<input type="checkbox"/> Double Ball Basket	Quantity _____
<input type="checkbox"/> Medium Stud	Quantity _____	<input type="checkbox"/> Button Stud	Quantity _____	<input type="checkbox"/> Tusk	Quantity _____
<input type="checkbox"/> Large Stud	Quantity _____	<input type="checkbox"/> Ball & Collar	Quantity _____	<input type="checkbox"/> Hammered Spear	Quantity _____
<input type="checkbox"/> Hammered Stud	Quantity _____	<input type="checkbox"/> Hammered Ball & Collar	Quantity _____	<input type="checkbox"/> Jacobs Horn	Quantity _____
<input type="checkbox"/> Flared Stud	Quantity _____	<input type="checkbox"/> Ribbed Ball & Collar	Quantity _____	<input type="checkbox"/> Loop	Quantity _____
<input type="checkbox"/> Flared Disc	Quantity _____	<input type="checkbox"/> Crystal Ball & Collar	Quantity _____	<input type="checkbox"/> Curling Leaf	Quantity _____
<input type="checkbox"/> Hammered Stud	Quantity _____	<input type="checkbox"/> Ball & Claw	Quantity _____	<input type="checkbox"/> Square Rams Horn	Quantity _____
<input type="checkbox"/> Hammered Disc	Quantity _____	<input type="checkbox"/> Twisted Knot	Quantity _____	<input type="checkbox"/> Reverse Square Rams Horn	Quantity _____

Handed Finial Left Right

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



A
preferred option



B

Pole Length Pole & Finial Length

Bay Pole - Please fill in Bay Form

5 Brackets

<input type="checkbox"/> Single - Side	Quantity _____	<input type="checkbox"/> Single - Mid	Quantity _____	<input type="checkbox"/> Single - Passing	Quantity _____
Projection <input type="checkbox"/> 60mm (2 3/8") <input type="checkbox"/> 100mm (4") <input type="checkbox"/> Custom _____ See specification guide for availability					
<input type="checkbox"/> Single - Recess	Quantity _____	<input type="checkbox"/> Single Covered - Mid	Quantity _____	<input type="checkbox"/> Single Covered - Passing	Quantity _____
Projection <input type="checkbox"/> 60mm (2 3/8") <input type="checkbox"/> 100mm (4") <input type="checkbox"/> Custom _____ See specification guide for availability					
<input type="checkbox"/> Ceiling	Quantity _____	<input type="checkbox"/> Ceiling Passing	Quantity _____		
Projection <input type="checkbox"/> 60mm (2 3/8") <input type="checkbox"/> 100mm (4") <input type="checkbox"/> Custom _____ See specification guide for availability					
<input type="checkbox"/> Double - Side	Quantity _____	<input type="checkbox"/> Double - Mid	Quantity _____	<input type="checkbox"/> Double - Passing	Quantity _____
<input type="checkbox"/> Adjustable - Side	Quantity _____	<input type="checkbox"/> Adjustable - Mid	Quantity _____	<input type="checkbox"/> Adjustable - Passing	Quantity _____

6 Rings Classic Ring Quantity _____ Classic Passing Ring Quantity _____

7 Accessories Hold Back Quantity _____ Ombre Quantity _____ Draw Rod Quantity _____
 Standard Stud Ball & Collar Standard Stud Ball & Collar Standard Stud Ball & Collar
 Tie Back Hook Quantity _____

8 Additional Requirements

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

Signed Date