



VERTICAL SLIDING WINDOW ORDER FORM  
 TEL: 01274 742280 FAX: 01274 744000

QUOTE  ORDER

<u>Frame Colour</u> White <input type="checkbox"/> Mahogany <input type="checkbox"/> Rosewood <input type="checkbox"/> Oak <input type="checkbox"/> Mahogany on White <input type="checkbox"/> Oak on White <input type="checkbox"/>		From: _____ Address: _____ _____ _____ Tel: _____ Fax: _____	PT No. _____ Ref: _____ Order Date: _____ Date Required: _____ Price: _____
---	--	---	---

Location	1.	2.	3.	4.	5.	6.
Frame Design						
Overall Width						
Overall Height						
Transom Drop						
External Cill / Size (mm)	150 <input type="checkbox"/> 210 <input type="checkbox"/>	150 <input type="checkbox"/> 210 <input type="checkbox"/>	150 <input type="checkbox"/> 210 <input type="checkbox"/>	150 <input type="checkbox"/> 210 <input type="checkbox"/>	150 <input type="checkbox"/> 210 <input type="checkbox"/>	150 <input type="checkbox"/> 210 <input type="checkbox"/>
Sash Horns	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Furniture Colour	White <input type="checkbox"/> Gold <input type="checkbox"/> Chrome <input type="checkbox"/>	White <input type="checkbox"/> Gold <input type="checkbox"/> Chrome <input type="checkbox"/>	White <input type="checkbox"/> Gold <input type="checkbox"/> Chrome <input type="checkbox"/>	White <input type="checkbox"/> Gold <input type="checkbox"/> Chrome <input type="checkbox"/>	White <input type="checkbox"/> Gold <input type="checkbox"/> Chrome <input type="checkbox"/>	White <input type="checkbox"/> Gold <input type="checkbox"/> Chrome <input type="checkbox"/>
Trickle Vent	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Slide Restrictors	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Deep Bottom Rail Mechanical						
Slim Bottom Rail Welded						
Glass / Pattern						
Astragal Bar						
Geo / Lead						
Comments						

Please complete all sections to ensure correct process of your order.  
 Signature of this order deems you have accepted our terms and conditions of sale.  
 Company Reg. No. 60778357 VAT No: 898 0495 63

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_