



Quotation / Order Form

Please complete all sections below (please tick boxes required)

Company: _____ Contact Name: _____ Delivery Address: _____ _____ _____ Postcode: _____ Tel Number: _____ Email: _____	Tick here for a Quotation: <input type="checkbox"/> Tick here to go straight to Order: <input type="checkbox"/> Total Qty of Windows Required: _____ Your Reference: _____ Date: _____ Date Required for Delivery: _____ This is Sheet: _____ of: _____
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Please Specify Colour / Foil Finish Required:	Hardware:	Additional Extras:																																																							
Profile Colour Standard White <input type="checkbox"/> Sash Horns: Run-through <input type="checkbox"/> No Horns <input type="checkbox"/>	<table border="0"> <tr> <td>Standard Furniture</td> <td>Yes</td> <td>No</td> <td>Furniture Colours</td> <td></td> </tr> <tr> <td>Travel Restrictors</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>White</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Pole Eyes</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Black</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sash Lifts</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Chrome</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Tilt Knobs</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Gold</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td>Satin</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Alternative Furniture</td> <td>Yes</td> <td>No</td> <td>NEW</td> <td></td> </tr> <tr> <td>D Handles</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Antique Gold</td> <td><input type="checkbox"/></td> </tr> <tr> <td>If Yes</td> <td></td> <td></td> <td>Rose Gold</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Internal <input type="checkbox"/></td> <td></td> <td></td> <td>Black Nickel</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td>External <input type="checkbox"/></td> <td></td> </tr> </table>	Standard Furniture	Yes	No	Furniture Colours		Travel Restrictors	<input type="checkbox"/>	<input type="checkbox"/>	White	<input type="checkbox"/>	Pole Eyes	<input type="checkbox"/>	<input type="checkbox"/>	Black	<input type="checkbox"/>	Sash Lifts	<input type="checkbox"/>	<input type="checkbox"/>	Chrome	<input type="checkbox"/>	Tilt Knobs	<input type="checkbox"/>	<input type="checkbox"/>	Gold	<input type="checkbox"/>				Satin	<input type="checkbox"/>	Alternative Furniture	Yes	No	NEW		D Handles	<input type="checkbox"/>	<input type="checkbox"/>	Antique Gold	<input type="checkbox"/>	If Yes			Rose Gold	<input type="checkbox"/>	Internal <input type="checkbox"/>			Black Nickel	<input type="checkbox"/>				External <input type="checkbox"/>		DocQ* <input type="checkbox"/> Fire Egress <input type="checkbox"/> Acoustic Glass <input type="checkbox"/> Laminated Glass <input type="checkbox"/> 1.2 U Value <input type="checkbox"/> White Spacer Bar <input type="checkbox"/> <small>*Includes laminated glass and upgraded lock</small>
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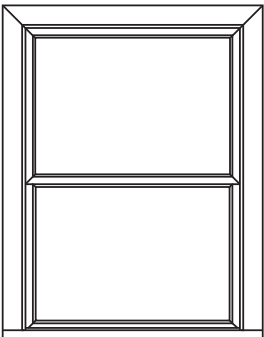
Item:			
Location: _____			
Width mm _____			
Height mm _____			
Transom Drop 50/50 <input type="checkbox"/> Other _____			
Quantity _____			
Cill Horns Yes <input type="checkbox"/> _____ mm each side			
Cill 152mm <input type="checkbox"/> 185mm <input type="checkbox"/> 225mm <input type="checkbox"/>			
Add Ons Included in sizes unless stated otherwise			
Head	25mm <input type="checkbox"/>	40mm <input type="checkbox"/>	N/A <input type="checkbox"/>
Cill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LHS Jamb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RHS Jamb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trickle Vent Yes <input type="checkbox"/> Quantity: _____ No <input type="checkbox"/>			

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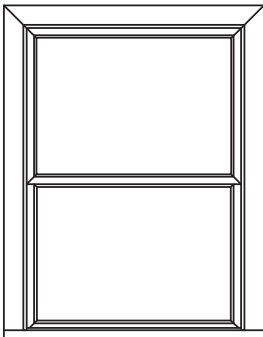
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Trickle Vent Yes <input type="checkbox"/> Quantity: _____ No <input type="checkbox"/>			

If required, sketch bars below
 Int' Georgian Ext' Astragal



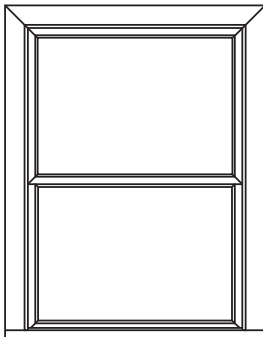
Toughened Glass as standard

If required, sketch bars below
 Int' Georgian Ext' Astragal



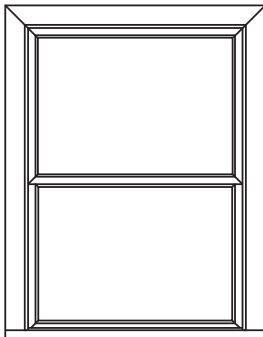
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Toughened Glass as standard

If required, sketch bars below
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Toughened Glass as standard

Glass Pattern: _____

Glass Pattern: _____

Glass Pattern: _____

Glass Pattern: _____

Special Instructions: e.g RAL spray

Trickle Vent table*			
Min	Max	No. Vents	EQA
370	599	1x2500	2500
600	849	2x2500	5000
850	1099	3x2500	7500
1100	1600	4x2500	10000