

Name: _____

Address: _____

Post Code: _____

Phone: _____ Email: _____

Reference:

Date Required:

Colour: (Note - dual colours are listed with external colour first)

Grained White <input type="checkbox"/>	English Oak* <input type="checkbox"/>	Clott. Cream/Grained Wht <input type="checkbox"/>	Irish Oak/Grained Wht* <input type="checkbox"/>	No 10 Black/Grained Wht* <input type="checkbox"/>
Cotswold Biscuit <input type="checkbox"/>	Irish Oak* <input type="checkbox"/>	Cots. Green/Grained Wht* <input type="checkbox"/>	Silvered Oak/Grain Wht* <input type="checkbox"/>	No 10 Black/Cots. Biscuit* <input type="checkbox"/>
Clotted Cream <input type="checkbox"/>	Silvered Oak* <input type="checkbox"/>	Painswick/Grained Wht <input type="checkbox"/>	Eclectic Grey/Grain. Wht* <input type="checkbox"/>	No 10 Black/Eng. Oak* <input type="checkbox"/>
Cotswold Green* <input type="checkbox"/>	Eclectic grey* <input type="checkbox"/>	Painswick/Clotted Cream <input type="checkbox"/>	Eclectic Grey/Eng. Oak* <input type="checkbox"/>	Corse Lawn/Grained Wht* <input type="checkbox"/>
Painswick <input type="checkbox"/>	Cots. Biscuit/Grain Wht. <input type="checkbox"/>	Eng. Oak/Grained Wht* <input type="checkbox"/>		Vintage Cream (non-foil) <input type="checkbox"/>

NOTE: * - Denotes Steel Reinforcing Required

Handle Colour:

Black <input type="checkbox"/>	Satin <input type="checkbox"/>
Pewter <input type="checkbox"/>	Antique Bronze <input type="checkbox"/>
Chrome <input type="checkbox"/>	Red Bronze <input type="checkbox"/>
Gold <input type="checkbox"/>	Bright Bronze <input type="checkbox"/>
White <input type="checkbox"/>	
Graphite <input type="checkbox"/>	

Handle Type:

Monkey Tail <input type="checkbox"/>
Pear Drop <input type="checkbox"/>
Standard <input type="checkbox"/>

Peg Stays:

Working <input type="checkbox"/>
Dummy <input type="checkbox"/>

Cill:

No Cill <input type="checkbox"/>
Radlington 198x30mm <input type="checkbox"/>
Radlington 198x55mm <input type="checkbox"/>
125mm <input type="checkbox"/>
210mm <input type="checkbox"/>

Bead Type:

Decorative Bead <input type="checkbox"/>
Square Bead <input type="checkbox"/>
Staff Bead <input type="checkbox"/>

Hinges:

Friction Stays <input type="checkbox"/>
Butt Hinges <input type="checkbox"/>
Dummy Butt Hinges <input type="checkbox"/>

Document Q:

<input type="checkbox"/>

Qty	Outside View	Dimensions (inclusive of cills)	Splits	Glass	Notes	
		WIDTH:	TRANSOM:	Double <input type="checkbox"/> Triple <input type="checkbox"/>		Mega Egress <input type="checkbox"/>
		HEIGHT:	MULLION:			T/Vent Qty.: <input type="checkbox"/>
						Head <input type="checkbox"/>
						Sash <input type="checkbox"/>
		WIDTH:	TRANSOM:	Double <input type="checkbox"/> Triple <input type="checkbox"/>		Mega Egress <input type="checkbox"/>
		HEIGHT:	MULLION:			T/Vent Qty.: <input type="checkbox"/>
						Head <input type="checkbox"/>
						Sash <input type="checkbox"/>
		WIDTH:	TRANSOM:	Double <input type="checkbox"/> Triple <input type="checkbox"/>		Mega Egress <input type="checkbox"/>
		HEIGHT:	MULLION:			T/Vent Qty.: <input type="checkbox"/>
						Head <input type="checkbox"/>
						Sash <input type="checkbox"/>
		WIDTH:	TRANSOM:	Double <input type="checkbox"/> Triple <input type="checkbox"/>		Mega Egress <input type="checkbox"/>
		HEIGHT:	MULLION:			T/Vent Qty.: <input type="checkbox"/>
						Head <input type="checkbox"/>
						Sash <input type="checkbox"/>

ADDITIONAL NOTES:

I confirm that the information provided above is correct, I therefore authorise you to proceed with manufacture in accordance with these details. I understand this order is subject to the conditions of sale which are available on request.

Signed: _____

Date: _____

☐ Tick Here if you do not want to be added to our mailing list



V.A.T. Reg. No:
943 833 603