



CUSTOMER ORDER FORM

Customer: _____ Page No: _____ of _____
 Contact Person: _____ Contact Phone: _____
 Email: _____
 Delivery Address: _____
 Order No: _____ Project Reference: _____
 Install Date: _____ Date Required: _____
 Delivery Required: _____ Dry Fit Required: _____ Hinging Required: _____

BELOW SECTION MUST BE COMPLETED – Missing information will delay your production start date.

Door Style: _____
 Edge Style: Square 1mm Pencil 2mm Pencil
 Door Colour: _____
 Gloss Level: Matt Satin Semi-Gloss Gloss
 Board Type: 16mm 18mm 25mm 32mm

Please Note: Alterations and/or cancellations must be made within 4 hours of the order being placed.

Failure to do so will result in the full amount being charged.

Line No	Door/Drawer Panel/Frame (Please specify)	Qty	Height in mm	Width in mm	Edge Style					Diagram Type	Bottom Rail Height in mm	Mid Rail Height in mm	Additional Information
					T	B	L	R	ALL				
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

NB: Max height 2.4m, Max width 1.2m, Max split panel is 4 times, Minimum stile and rail size 5mm