

Quotation Request Form

Draperies & Sheers

CUSTOMER _____

CONTACT NAME _____

PHONE _____ EMAIL _____

PROJECT NAME _____

Please check the items that are being specified.

<p>TYPE</p> <p><input type="checkbox"/> French (Pinch) Pleat</p> <p><input type="checkbox"/> Ripplefold</p> <p><input type="checkbox"/> Accordia-fold</p> <p><input type="checkbox"/> Panel Track System</p> <p><input type="checkbox"/> Other _____</p> <p>FULLNESS</p> <p><input type="checkbox"/> 200% Standard</p> <p><input type="checkbox"/> Other _____</p> <p>DRAW</p> <p><input type="checkbox"/> Center Open</p> <p><input type="checkbox"/> One Way</p> <p><input type="checkbox"/> Other _____</p> <p>CUT-OUTS REQUIRED (Moulding)</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>MOUNTING</p> <p><input type="checkbox"/> Wall <input type="checkbox"/> Ceiling</p> <p>WALL TO WALL</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Concrete <input type="checkbox"/> Drywall</p> <p>CONSTRUCTION</p> <p><input type="checkbox"/> New <input type="checkbox"/> Existing</p>	<p>DRAPERY FABRIC</p> <p><input type="checkbox"/> COM (Customer Supplied)</p> <p><input type="checkbox"/> Fabric Inclusive (County Supplied)</p> <p>Pattern _____</p> <p>Color _____</p> <p>Width _____</p> <p>Vert. Repeat _____</p> <p>Horiz. Repeat _____</p> <p>LININGS</p> <p><input type="checkbox"/> 2 Pass Blackout Grey/White</p> <p><input type="checkbox"/> 2 Pass Blackout Grey/Beige</p> <p><input type="checkbox"/> 3 Pass Blackout White/White</p> <p><input type="checkbox"/> 3 Pass Blackout Ivory/Ecru</p> <p><input type="checkbox"/> 3 Pass Blackout White/Beige</p> <p><input type="checkbox"/> Cotton/Poly</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Unlined</p> <p>HARDWARE</p> <p><input type="checkbox"/> Included <input type="checkbox"/> Not Included</p> <p>HARDWARE TYPE</p> <p><input type="checkbox"/> Cord</p> <p><input type="checkbox"/> Baton</p> <p><input type="checkbox"/> White 36" Standard Baton</p> <p><input type="checkbox"/> Clear 36" Baton</p> <p><input type="checkbox"/> Other _____</p>	<p>SHEER FABRIC</p> <p><input type="checkbox"/> COM (Customer Supplied)</p> <p><input type="checkbox"/> Fabric Inclusive (County Supplied)</p> <p>Pattern _____</p> <p>Color _____</p> <p>Width _____</p> <p>Vert. Repeat _____</p> <p>Horiz. Repeat _____</p> <p>VALUE ENGINEERED MATERIALS (Stock Items)</p> <p><input type="checkbox"/> Batiste <input type="checkbox"/> White <input type="checkbox"/> Marble</p> <p><input type="checkbox"/> Voile <input type="checkbox"/> White <input type="checkbox"/> Marble</p> <p>RAILROAD SHEERS</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>WIDTH</p> <p><input type="checkbox"/> Covered Corner Weight (std)</p> <p><input type="checkbox"/> Beaded Chain in 1/4" Rolled Hem</p> <p>TAKE DOWN EXISTING</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>MEASURE AND INSTALL</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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QTY	AREA	ITEM DESCRIPTION	FINISHED WIDTH	FINISHED LENGTH



Quotation Request Form

Window Layout Dimensions

CUSTOMER _____

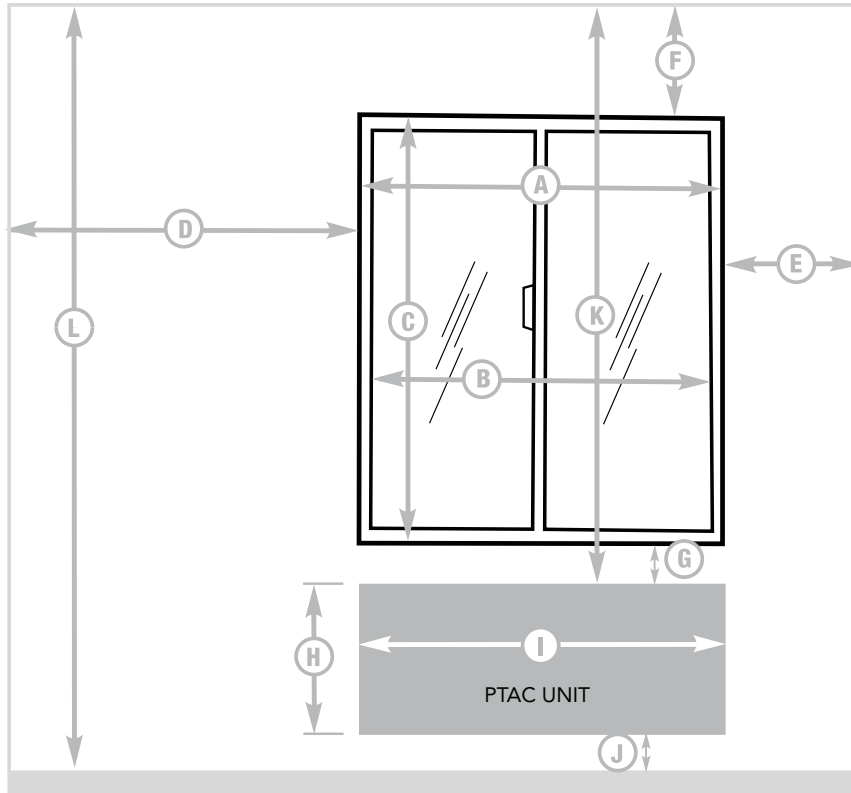
CONTACT NAME _____

PHONE _____

EMAIL _____

PROJECT NAME _____

The Chart below shows the twelve critical measurements needed in order to fabricate treatments correctly.



Insert dimensions requested in the blank lines below and submit this page along with the Quote Request Form for the Window Treatments needed.

- A. _____ - Width of Window (outside measurement)
- B. _____ - Width of Window (inside measurement)
- C. _____ - Height of Window
- D. _____ - Width from Left of Window to Wall
- E. _____ - Width from Right of Window to Wall
- F. _____ - Height from Top of Window to Ceiling
- G. _____ - Height from Bottom of Window to Top of PTAC
- H. _____ - PTAC Height
- I. _____ - PTAC Width
- J. _____ - Bottom of PTAC to Floor
- K. _____ - Top of PTAC to Ceiling
- L. _____ - Height from Ceiling to Floor