

Complete Door Quote/Order Form



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Tel: 01302 880066 Fax: 01302 887070

Company Name:

PLEASE MARK CLEARLY WITH X

ORDER		QUOTE	
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CUSTOMER REFERENCE:

VIEWED FROM OUTSIDE

Required By Date :

DOOR STYLE

Signature:

WIDTH (Min 850 Max 1023)

Print name:

HEIGHT (Min 2018 Max 2118)

DOOR OUTER COLOUR

*** PLEASE FILL OUT ALL FIELDS ***
GIVE AS MUCH INFORMATION AS POSSIBLE

FRAME OUTER COLOUR

DOOR INNER COLOUR White

FRAME INNER COLOUR White

THRESHOLD Std / AM3 / AM3-70 / AM5 open out

CILL NONE/STUBB CILL/ 150ML CILL

DRAINAGE BASE DRAIN / FACE DRAIN

GLASS DESIGN

BACKING GLASS

OPENS IN / OUT

HINGED (VIEWED FROM OUTSIDE) LEFT / RIGHT

LOCK TYPE : STANDARD MULTI POINT

STANDARD HANDLES LEVER LEVER / LEVER PAD

FURNITURE COLOUR Gold/Chrome/Brushed/White/Black

LETTERPLATE

KNOCKER If required please specify type

SPY HOLE VIEWER

DRAWING IF NECESSARY

ANY ADDITIONAL INFORMATION:

