

QUICK ORDER FORM 1 FORM PER VARIATION



ORDER



QUOTE

Name:

Date:

Customer order
number:

Phone:

Date required:

Invoice to:

Deliver to:

Please complete the fields below. After completion please press 'SUBMIT' button and a sales team member will contact you.

Type:

Type of Frame:

Size of Opening:

WIDTH (mm)

HEIGHT (mm)

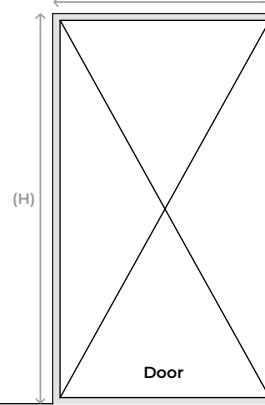
Size of Door:

WIDTH (mm)

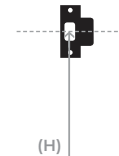
HEIGHT (mm)

Size of Opening

(W)



Striker Height (mm)



Finish Floor Level

Door Frame
Quantity:

Door Thickness:
WIDTH (mm)

Finish:

if powder coat please specify

CODE

BRAND

COLOUR

Handing:

Single Door



Left Hand

Right Hand

Double Door



Left Hand Active

Right Hand Active

No Rebate

Type of Striker:

☐ ADX to Supply

☐ Customer to Supply

Striker Height (mm)

(floor to center)

Schlegel (felt) Colour:

Additional Notes / Extras

I agree that the details submitted on this order form are accurate in every aspect.

If you require any further assistance completing this form please call the ADX Depot team on (08) 8292 5000 or email solutions@adxdepot.com.au.

OFFICE USE ONLY

Date:

Sales team
member:

Phone:

Delivery
docket: