

Shutter Order Form

Phone 205-841-6424 • 800-662-5894 • Fax 205-841-6888
 516 Jefferson Boulevard • Birmingham, AL 35217
 www.PolyDesign.com

Date: _____
 Dealer Name: _____
 Phone: _____
 Address: _____
 City: _____ Zip: _____
 Signature: _____

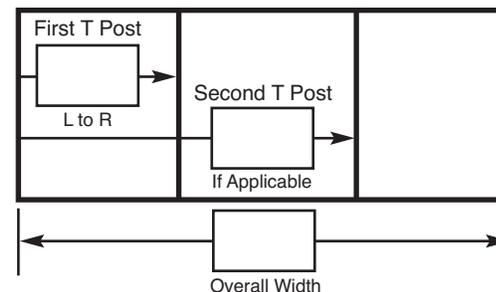
Special Instructions

Product	Louver	Hinge Color	Shutter
<input type="checkbox"/> Original	<input type="checkbox"/> 2.5	<input type="checkbox"/> Antique Brass <input type="checkbox"/> Nickel	Color: _____
<input type="checkbox"/> Amberwood®	<input type="checkbox"/> 3.5	<input type="checkbox"/> Brass <input type="checkbox"/> Rubbed Bronze	Sidemark: _____
<input type="checkbox"/> _____	<input type="checkbox"/> 4.5	<input type="checkbox"/> Black <input type="checkbox"/> Color Match	

Line	Location (room)	Qty	Width	Length	Mount		No. of Panels This Opening	Split T Post see below	T Post see below	Hinge Code see catalog		*Divider Rail see below		Tilt Rod		Enter Frame # In Each Box				Total Price
					Inside	Outside				Left	Right	Mark if Yes	Location	Front	Rear	Left	Right	Top	Bottom	
X	(Example) Master Bath	1	36	36	✓		2		✓	1	1	✓	18	✓		105	105	105	110 Sill	
1																				
2																				
3																				
4																				
5																				
6																				

Authorization:
 I understand that this is a custom-made product and is not subject to change, cancellation, or return. I also confirm that the width, length, color and style of product is correct. THIS WORK ORDER CONSTITUTES A CONTRACT.

*Measure from sill or bottom of frame up to the center of divider rail.



Freight
 Total Price

SIGNATURE: _____
 (must be signed to process order)