



# Order Form

Company:		Name:	
Address:		PO	
City:		Phone:	
State:		Email:	
Zip		Country:	

**Ship To:** Same As Above  Other

Company:		Attn:	
Address:		Phone:	
City:		Email:	
State:		Country:	
Zip		Other:	

**Retractable Screen Details. Submit additional order forms if required**

<b>Quantity</b> _____	<b>Quantity</b> _____
<b>Width</b> _____ft _____in	<b>Width</b> _____ft _____in
<b>Drop</b> _____ft _____in	<b>Drop</b> _____ft _____in
<b>Fabric Brand</b> _____ <b>Fabric Color Names/#</b> _____	<b>Fabric Brand</b> _____ <b>Fabric Color Names/#</b> _____
<b>Frame Color:</b> White <input type="checkbox"/> Sand <input type="checkbox"/> Coco <input type="checkbox"/> Latte <input type="checkbox"/>	<b>Frame Color:</b> White <input type="checkbox"/> Sand <input type="checkbox"/> Coco <input type="checkbox"/> Latte <input type="checkbox"/>
<b>Cable Option:</b> YES <input type="checkbox"/> NO <input type="checkbox"/> Mount Location: Wall Mount <input type="checkbox"/> Floor Mount <input type="checkbox"/>	<b>Cable Option:</b> YES <input type="checkbox"/> NO <input type="checkbox"/> Mount Location: Wall Mount <input type="checkbox"/> Floor Mount <input type="checkbox"/>
<b>Gear Location:</b> (When facing installed screen) Left <input type="checkbox"/> Right <input type="checkbox"/>	<b>Gear Location:</b> (When facing installed screen) Left <input type="checkbox"/> Right <input type="checkbox"/>
<b>Motor:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>Motor:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>Hood Kit:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>Hood Kit:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>

Gear Includes 55" winding brace  
 Motor Includes transmitter and 65" winding brace  
 Hood is cut 1.5" larger than the overall width of the unit

Date: \_\_\_\_\_ Signature: \_\_\_\_\_