# DOOR ORDER FORM

**BILL TO:**

CUSTOMER NAME: _____

PHONE: _____

FAX/E-MAIL: _____

ADDRESS: _____

**SHIP TO:**

CONTACT:_____

PHONE: _____

ADDRESS: _____

CITY, ST., ZIP: _____

P.O./JOB NAME: _____

**DOOR STYLE**  SQ.TOP: _____  ARCH TOP: _____

WOOD TYPE:_____

PANEL CUT: _____

STICKING CUT: _____

EDGE PROFILE: _____

OPENING OVERLAY:_____

HINGE:_____

DOOR THICKNESS: _____

APPLIED MOULDING:_____

FINISH SIZES:_____

PLATE:_____

INSET:_____

## PLEASE USE A SEPARATE PAGE FOR EACH DOOR STYLE

| DOORS | | | | |
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| Item # | Qty. | Width | Height | Notes |
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| DRAWER FRONTS | | | | |
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| Item # | Qty. | Width | Height | Notes |
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I hereby agree to the term and conditions as stated on the "Terms and Conditions", and I also agree that this order is correct and understand that I will accept the above described merchandise.

SIGNATURE: _____  DATE: _____

# NOTES OR DRAWINGS