

QUOTE/ORDER

Quote # / PO #: _____

Customer: _____

Contact: _____ Date: _____ Time: _____

Phone #: _____ Fax #: _____

Job Reference: _____ Sales Person: _____

Address: _____

City, State, Zip: _____



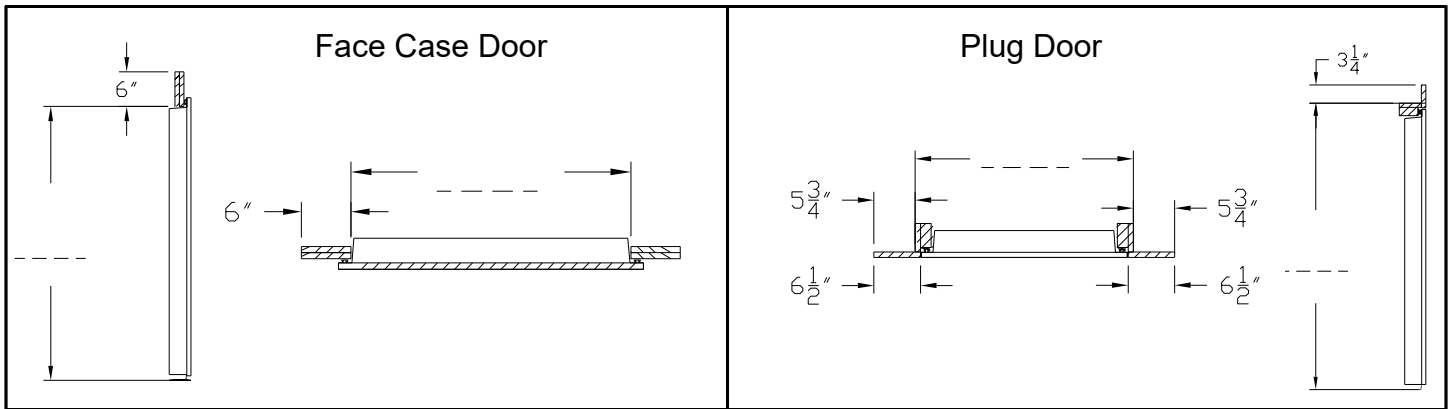
45545 242nd St
 Madison, SD 57042
 Phone: (888)207-2865
 Fax: (605)256-0353

Door Quote Form

Door Style (circle one): Face Case Plug **Type** (circle one): Cooler Freezer

Rough Opening: _____ Wide X _____ High

Indicate rough opening height and width on dotted lines below.



Door Specifications

Hinge (circle one): Right Left

Floor (circle one): No Floor Floor

Recessed Floor (circle one): Yes / No

Existing Floor Tile (circle one): Yes / No If yes, height: _____

Door Frame (circle one): 3 sided 4 sided *

Door Finish Select an Interior and Exterior metal option.

Metal Type Interior Exterior

Stainless Steel _____

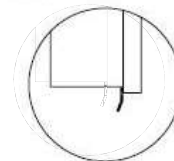
Galvalume _____

White Galvanized _____

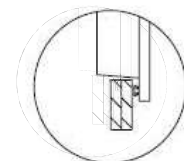
View Window (circle one): 14" x 14" 14" x 24"

*Option only available on Face Case Door.

Please circle one:



Sweep



Sill *

Sill Height: _____

Options Please circle any additional options.

Spring Hinge

Door Closure

Interior Kick Plate

Exterior Kick Plate

Additional Notes: _____