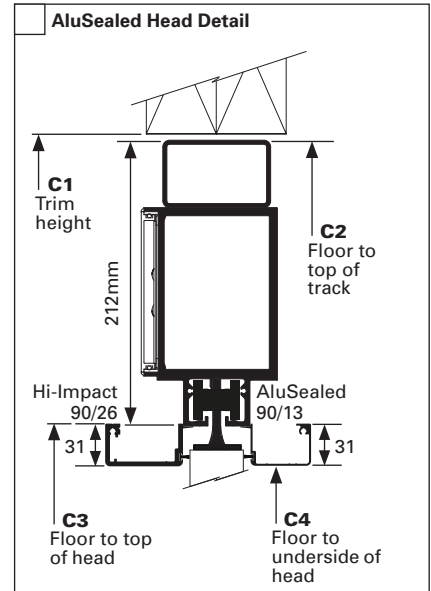
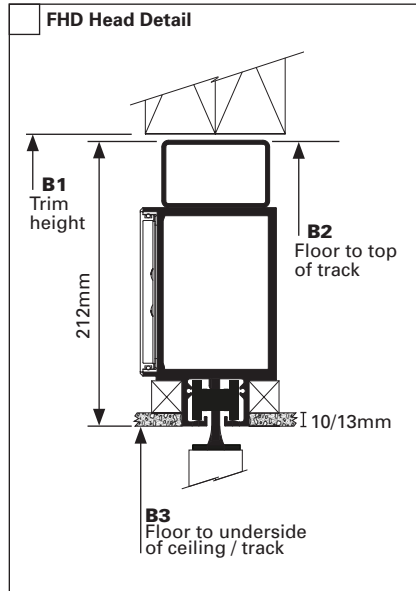
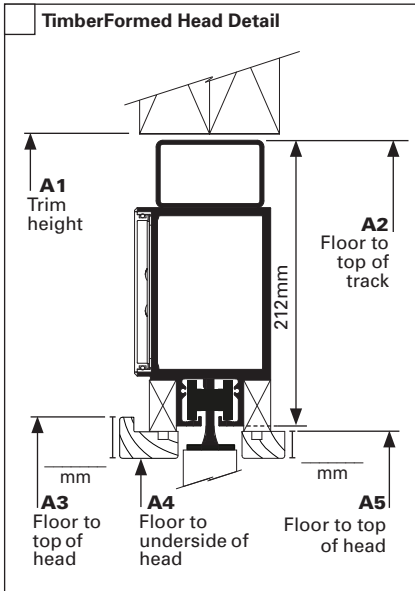


Customer _____
 Rep initials _____ Date _____
 Address/contact _____
 Door location _____ **Only one Door per Form**

Please match one of the Head Detail drawings with one of the Plan View drawings.

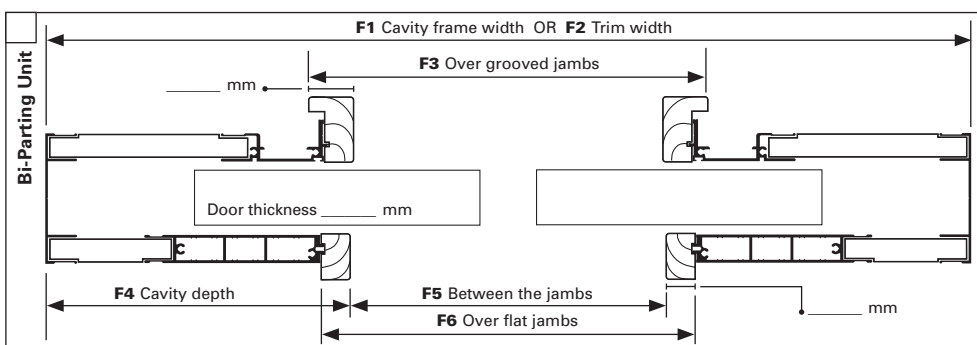
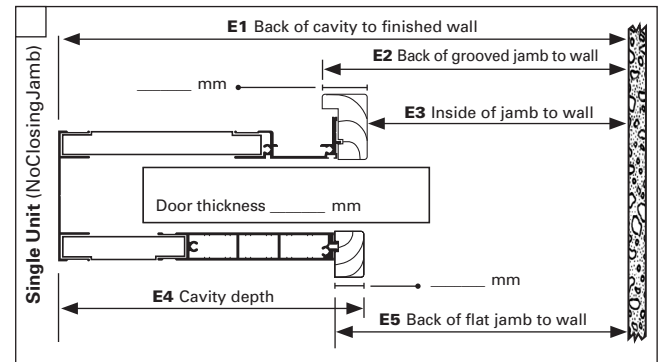
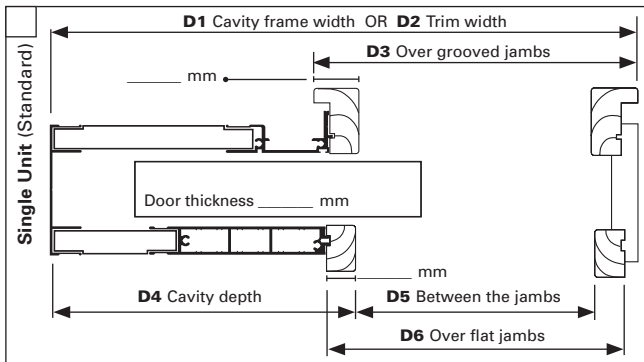


Critical height dimension agreed: **A1 A2 A3 A4 A5 B1 B2 B3 C1 C2 C3 C4** (Circle one only) is: _____ mm.

Flooring _____
 Will cavity frame sit hard on top of the floor? Yes No
 Is the floor existing at time of site measure? Yes No
 Proposed thickness of floor covering = _____ mm
 Is a gap under the door of 25mm (before floor coverings) acceptable? Yes No

Wall configuration
 10/90/10 13/90/13 26/90/26 Other _____
 Is ceiling batten in place? Yes No
 Is framing / resizing required on site? Yes No
 Dimensions given by builder (not measured) Yes No

Add _____ mm (max 15) to door height **OR** reduce cavity height by _____ mm (max 15) to reduce under door gap.



Mutually Agreed Critical Measurement of Dimension:

D1 D2 D3 D4 D5 D6
E1 E2 E3 E4 E5
F1 F2 F3 F4 F5 F6

(Please circle one only)

is: _____ mm.