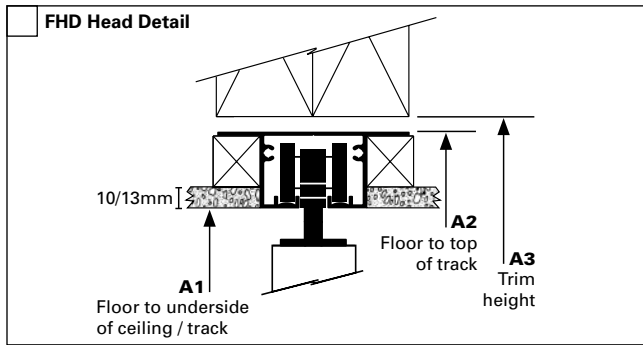


Customer _____
 Rep initials _____ Date _____
 Address/contact _____
 Door location _____ **Only one Door per Form**

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



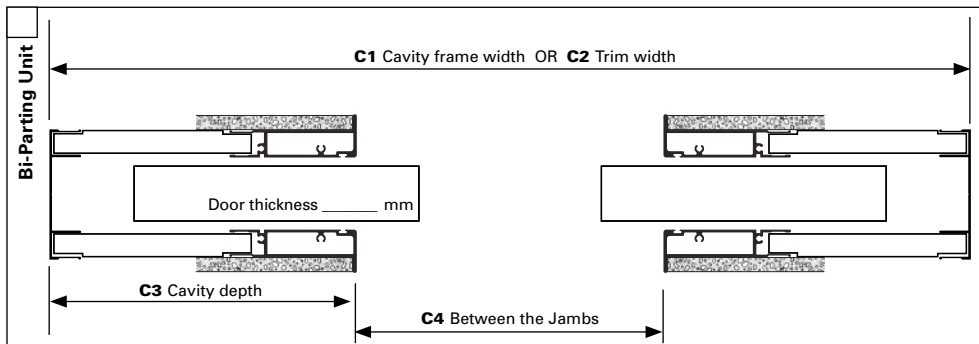
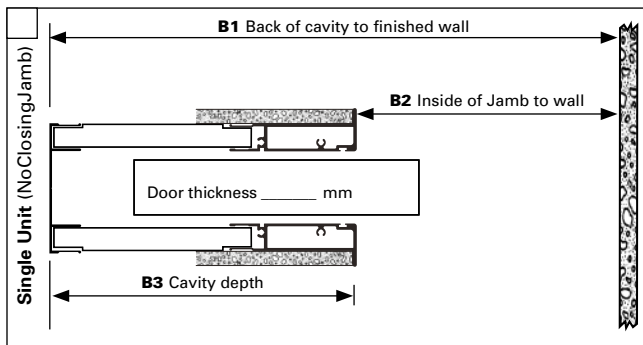
Door
 Height _____ Width _____
 Type _____
 Finish _____
 Glass _____
 H/W _____
 LH/RH Exit free _____
 H/W height _____

Wall configuration
 10/90/10 13/90/13

Who is supplying the door?
 Cust. CS No door

Critical height dimension agreed: **A1 A2 A3** (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
 Add _____ mm (max 15) to door height **OR** reduce Cavity height by _____ mm (max 15) to reduce under door gap.
 Is ceiling batten in place? Yes No
 Is framing / resizing required on site? Yes No
 Dimensions given by builder (not measured) Yes No



Mutually Agreed
 Critical Measurement of
 Dimension:
B1 B2 B3
C1 C2 C3 C4
 (Please circle one only)
 is: _____ mm.

Please contact your rep for job progress enquiries or contact our office on 02 9905 0588.

Signed by CS rep _____ Signed by (or on behalf of customer) _____
 Rep's contact no. _____ Print name _____