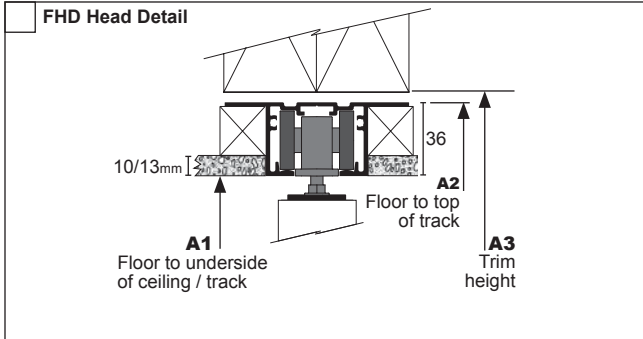


Date _____ Door location _____ CS Rep _____
 Customer _____ Phone _____
 Site _____ Email _____
 Contact _____ Measured from quote S _____

Only one Door per Form



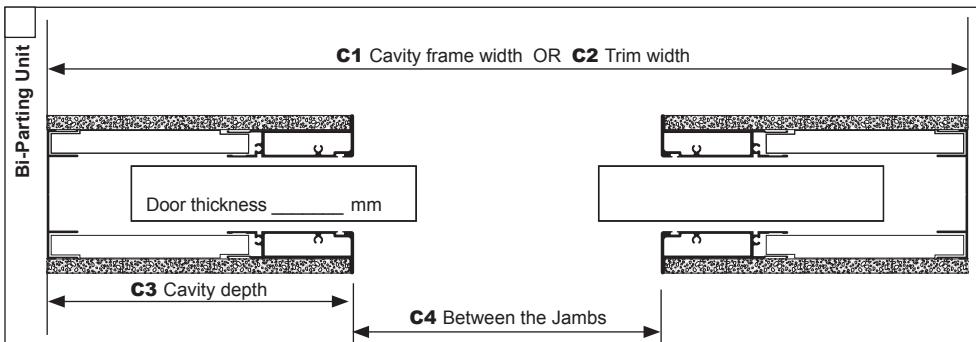
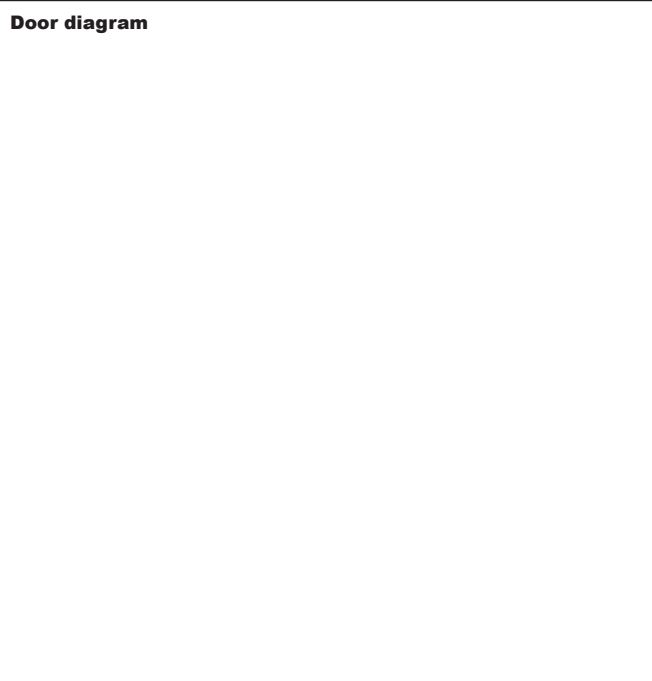
Door
 Height _____ Width _____
 Type _____
 Finish _____
 Glass _____
 H/W _____
 LH/RH Exit free _____
 H/W height _____

Wall configuration
 10/90/10 13/90/13
 Who is supplying the door?
 Cust. CS No door
SofStop®
 Soft close Soft Open

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: **02 9905 0588**
 Email: estimating@cavitysliders.com.au

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