Door Order Form

Factory 1-2/2 Nicole Close, Bayswater North, VIC 3153

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ftd

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Company / Customer: ...........................................................................................................................................................................

Address: ...............................................................................................................................................................................................

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Phone: ............................................................................................ Fax:...............................................................................................

Ref. / Order No.: .............................................................................. Completed by: ..............................................................................

Date Ordered: .................................................................................. Date Required: .............................................................................

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| --- | --- | --- |
|  |  **QUOTE** |  **ORDER** |
| Door Style: |  | Timber Species: |  | Colour range: |
| Square or Arch: |  | Edge Profile: |  |  Light  Medium  Dark |
| **Finish:**  Raw 30% Satin |  60% Semi-gloss |  Full Gloss  Other |
|  Stain |  Match Sample Provided |  |

\* Please refer to ordering information reference guide on pricelist

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Quantity** | **Height** | **Width** | **Square Edges X** | **Additional Information** |
| **L** | **R** | **T** | **B** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Qty | Dressed Timber (DAR) |
| L x W x T |
|  |  |  |  |
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| --- | --- |
| **Pantry Doors** | **Square Edges X** |
| **Qty** | **Height** | **Width** | **Standard mid rail height** | **Wide mid rail height to centre of rail** | **Bottom rail height (if not std 63mm)** | **Other** | **T** | **B** | **L** | **R** |
|  |  |  |  |  |  |  |  |  |  |  |
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| --- | --- |
| **Drawers:**  **½ Split mid rails**  **Full rails**  **Cut drawers** | **Square Edges X** |
| **Qty** | **Height** | **Width** | **1** | **2** | **3** | **4** |  | **T** | **B** | **L** | **R** |
|  |  |  |  |  |  |  |  |  |  |  |  |
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 **Total Number of Items**

 **Delivery**  **Pick-up**

**Please note:** If a change needs to be made, please notify us ASAP. A fee may be incurred if the job has commenced.

**OFFICE USE ONLY**

Date Entered: ........................

Invoice Number: ....................

|  |  |
| --- | --- |
| Qty | Cap Mould |
|  |  |
|  |  |
|  |  |
|  |  |