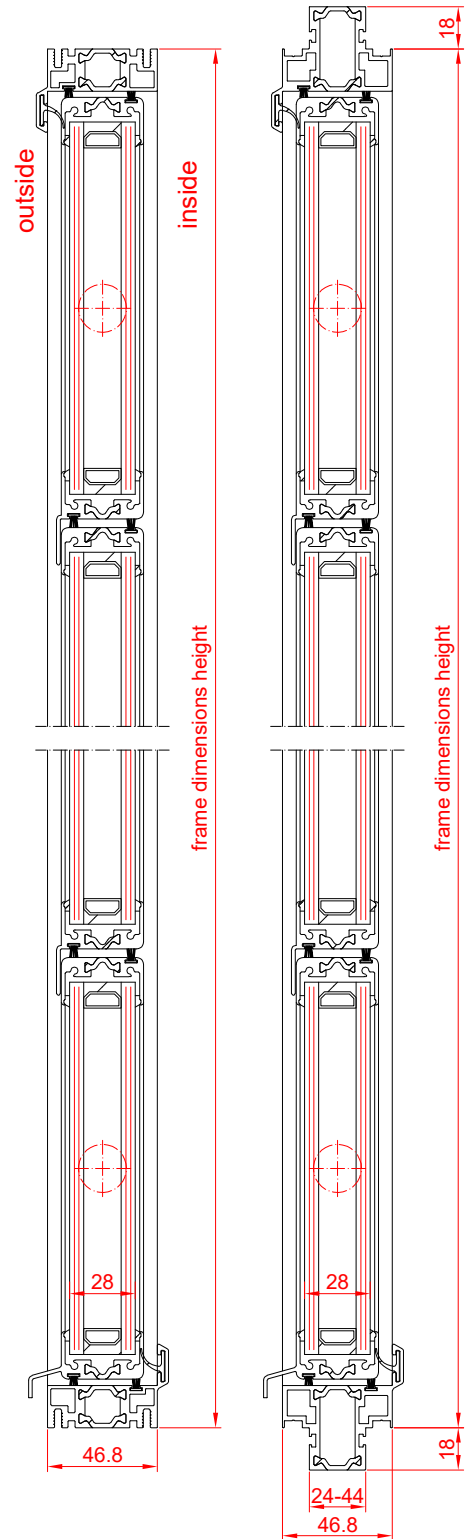


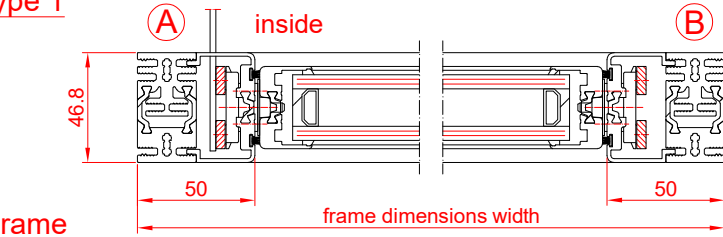
<b>status:</b>		<input type="checkbox"/> enquiry	<input type="checkbox"/> order
<b>project number:</b>		<b>purchase order:</b>	
<b>project manager:</b>		<b>phone number:</b>	
<b>desired delivery date:</b>		<b>date:</b>	
<b>project:</b>			
<b>delivery address:</b>			
<b>contact person on site:</b>			
<b>Pos.:</b>		<b>01</b>	<b>02</b>
<b>no.:</b>			
<b>frame dimensions</b>	<b>width:</b> (mm)		
	<b>height:</b> (mm)		
	<b>type of frame:</b>	<input type="checkbox"/> type 1 <input type="checkbox"/> type 2 thickness: _____ mm (see detail frame type 2)	<input type="checkbox"/> type 1 <input type="checkbox"/> type 2 thickness: _____ mm (see detail frame type 2)
<b>no. of blades:</b>			
<b>blade panel type</b>	<b>type of filling:</b>	<input type="checkbox"/> double glazed <input type="checkbox"/> insulated blades	<input type="checkbox"/> double glazed <input type="checkbox"/> insulated blades
	<b>glass design:</b> standard: outer side: _____ mm air space: _____ mm inner side: _____ mm	outer side: _____ mm air space: _____ mm inner side: _____ mm	outer side: _____ mm air space: _____ mm inner side: _____ mm
	<b>type of glass:</b>		
<b>finish</b>	<b>finish:</b>	<input type="checkbox"/> powder coated <input type="checkbox"/> natural anodised	<input type="checkbox"/> powder coated <input type="checkbox"/> natural anodised
	<b>colour supplier &amp; colourcode:</b>		
<b>controls</b>	<b>type of control:</b>	<input type="checkbox"/> manual <input type="checkbox"/> electric _____ V <input type="checkbox"/> pneumatic	<input type="checkbox"/> manual <input type="checkbox"/> electric _____ V <input type="checkbox"/> pneumatic
	<b>description:</b>		
	<b>cable length:</b> (standard = 2,5m)	_____ m	_____ m
	<b>cable exit:</b> (LAH 65 only)	<input type="checkbox"/> top <input type="checkbox"/> bottom <input type="checkbox"/> side through frame	<input type="checkbox"/> top <input type="checkbox"/> bottom <input type="checkbox"/> side through frame
	<b>control position:</b>	<input type="checkbox"/> position A (right side) <input type="checkbox"/> position B (left side) height _____ mm	<input type="checkbox"/> position A (right side) <input type="checkbox"/> position B (left side) height _____ mm
<b>fixing brackets / special adaptor:</b>			
<b>smoke vents</b>		<input type="checkbox"/> yes	<input type="checkbox"/> yes
<b>CE- certified:</b>		<input type="checkbox"/> no	<input type="checkbox"/> no

**Frame type 1**

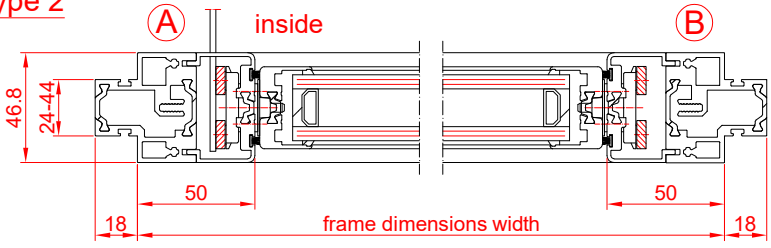
**Frame type 2**



**Frame type 1**



**Frame type 2**



**Detail frame type 2**

