

DATE _____
JOB NO. _____

ORDER FORM

CUST. NAME _____ SALESMAN _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

IS SOMEONE HOME DURING THE DAY? YES NO FINANCING REQUIRED? YES NO

HOME MAKE _____ MODEL _____ YEAR _____

SIZE ON TITLE _____ X _____ ACTUAL SIZE _____ X _____

HEATING METHOD OIL GAS ELECTRIC OTHER _____

OUTSIDE ELECTRIC YES NO PERMIT REQUIRED? YES NO

INSPECTION

HOME CONDITIONS

IS THERE EVIDENCE OF WATER DAMAGE? YES NO

CEILING STAINS YES NO EXPLAIN _____

WET CARPETING YES NO _____

PANEL STAINS YES NO _____

OTHER YES NO _____

JOB ESTIMATE

WIDTH _____ ft. + OVERHANG _____ in. = TOTAL WIDTH _____ ft.

LENGTH _____ ft. + OVERHANG _____ in. = TOTAL LENGTH _____ ft.

TOTAL WIDTH _____ ft. x TOTAL LENGTH _____ ft. = TOTAL SQ. FT. _____ sq.ft.

GOOD

- .020
- .024
- .032

BETTER

- .020
- .024
- .032

BEST

- .020
- .024
- .032

C-TRIM COLOR

- White Cream Brown

GUTTER/VALANCE COLOR

- White Cream Brown

OPTIONS

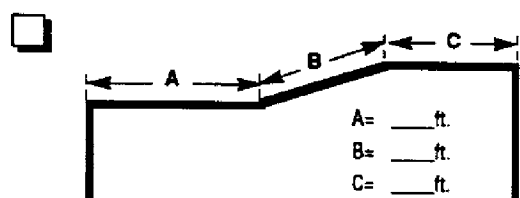
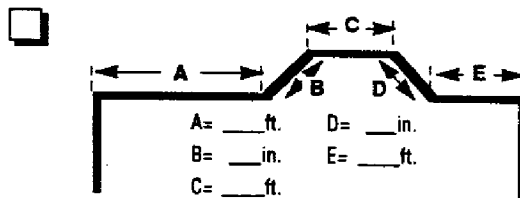
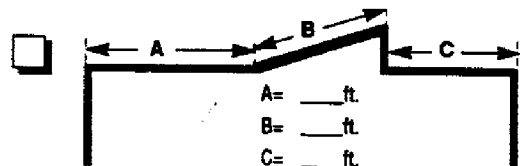
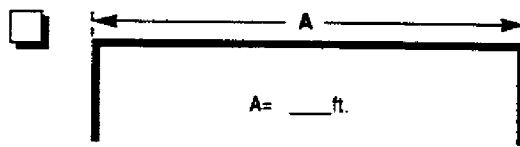
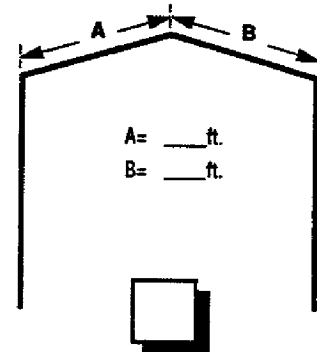
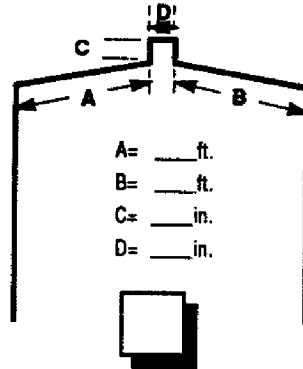
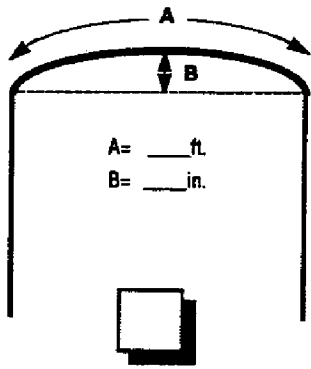
DATE _____

JOB NO. _____

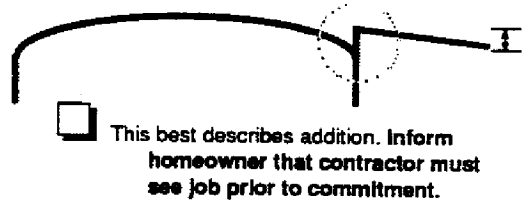
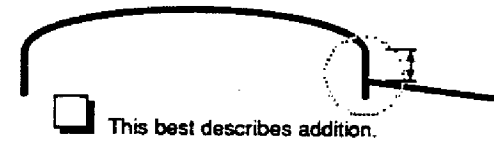
ORDER FORM

PG. 2 OF 3

CUST. NAME _____ SALESMAN _____



ADDITIONS



If your job is different than the ones depicted, use the worksheet on page 3.

Homeowner will: _____

Prior to installation, contractor will have to: _____

