

# ECOslide Quotation / Order Form

Please complete all sections below (please tick boxes required)

Company: \_\_\_\_\_

Tick here for a Quotation:  Tick here to go straight to Order:

Contact Name: \_\_\_\_\_

Total Qty of Windows Required: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

Your Reference: \_\_\_\_\_ Date: \_\_ / \_\_ / \_\_

Date Required for Delivery: \_\_ / \_\_ / \_\_ This is Sheet:  Of:

Tel Number: \_\_\_\_\_

Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Window 1	Window 2	Window 3	Window 4	Window 5
Width mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Width mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Width mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Width mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Width mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Height mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Height mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Height mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Height mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Height mm <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Transom Drop: 50/50 <input type="checkbox"/> Other _____	Transom Drop: 50/50 <input type="checkbox"/> Other _____	Transom Drop: 50/50 <input type="checkbox"/> Other _____	Transom Drop: 50/50 <input type="checkbox"/> Other _____	Transom Drop: 50/50 <input type="checkbox"/> Other _____
Quantity: _____	Quantity: _____	Quantity: _____	Quantity: _____	Quantity: _____
Cill Horns: No <input type="checkbox"/> Yes <input type="checkbox"/> _____mm	Cill Horns: No <input type="checkbox"/> Yes <input type="checkbox"/> _____mm	Cill Horns: No <input type="checkbox"/> Yes <input type="checkbox"/> _____mm	Cill Horns: No <input type="checkbox"/> Yes <input type="checkbox"/> _____mm	Cill Horns: No <input type="checkbox"/> Yes <input type="checkbox"/> _____mm
Cill: 152mm <input type="checkbox"/> 185mm <input type="checkbox"/> 225mm <input type="checkbox"/>	Cill: 152mm <input type="checkbox"/> 185mm <input type="checkbox"/> 225mm <input type="checkbox"/>	Cill: 152mm <input type="checkbox"/> 185mm <input type="checkbox"/> 225mm <input type="checkbox"/>	Cill: 152mm <input type="checkbox"/> 185mm <input type="checkbox"/> 225mm <input type="checkbox"/>	Cill: 152mm <input type="checkbox"/> 185mm <input type="checkbox"/> 225mm <input type="checkbox"/>
Add Ons (20mm): None <input type="checkbox"/> Head <input type="checkbox"/>	Add Ons (20mm): None <input type="checkbox"/> Head <input type="checkbox"/>	Add Ons (20mm): None <input type="checkbox"/> Head <input type="checkbox"/>	Add Ons (20mm): None <input type="checkbox"/> Head <input type="checkbox"/>	Add Ons (20mm): None <input type="checkbox"/> Head <input type="checkbox"/>
Cill <input type="checkbox"/> LHS Jamb <input type="checkbox"/> RHS Jamb <input type="checkbox"/>	Cill <input type="checkbox"/> LHS Jamb <input type="checkbox"/> RHS Jamb <input type="checkbox"/>	Cill <input type="checkbox"/> LHS Jamb <input type="checkbox"/> RHS Jamb <input type="checkbox"/>	Cill <input type="checkbox"/> LHS Jamb <input type="checkbox"/> RHS Jamb <input type="checkbox"/>	Cill <input type="checkbox"/> LHS Jamb <input type="checkbox"/> RHS Jamb <input type="checkbox"/>
Trickle Vent/s fitted as standard: Tick if <b>Not</b> Required <input type="checkbox"/>	Trickle Vent/s fitted as standard: Tick if <b>Not</b> Required <input type="checkbox"/>	Trickle Vent/s fitted as standard: Tick if <b>Not</b> Required <input type="checkbox"/>	Trickle Vent/s fitted as standard: Tick if <b>Not</b> Required <input type="checkbox"/>	Trickle Vent/s fitted as standard: Tick if <b>Not</b> Required <input type="checkbox"/>
Sash horns Required: No Horns <input type="checkbox"/> Run-through <input type="checkbox"/>	Sash horns Required: No Horns <input type="checkbox"/> Run-through <input type="checkbox"/>	Sash horns Required: No Horns <input type="checkbox"/> Run-through <input type="checkbox"/>	Sash horns Required: No Horns <input type="checkbox"/> Run-through <input type="checkbox"/>	Sash horns Required: No Horns <input type="checkbox"/> Run-through <input type="checkbox"/>
Furniture: Satin <input type="checkbox"/> Chrome <input type="checkbox"/> White <input type="checkbox"/>	Furniture: Satin <input type="checkbox"/> Chrome <input type="checkbox"/> White <input type="checkbox"/>	Furniture: Satin <input type="checkbox"/> Chrome <input type="checkbox"/> White <input type="checkbox"/>	Furniture: Satin <input type="checkbox"/> Chrome <input type="checkbox"/> White <input type="checkbox"/>	Furniture: Satin <input type="checkbox"/> Chrome <input type="checkbox"/> White <input type="checkbox"/>
Chrome <input type="checkbox"/> Gold <input type="checkbox"/> Black <input type="checkbox"/>	Chrome <input type="checkbox"/> Gold <input type="checkbox"/> Black <input type="checkbox"/>	Chrome <input type="checkbox"/> Gold <input type="checkbox"/> Black <input type="checkbox"/>	Chrome <input type="checkbox"/> Gold <input type="checkbox"/> Black <input type="checkbox"/>	Chrome <input type="checkbox"/> Gold <input type="checkbox"/> Black <input type="checkbox"/>
Travel Restrictors: Yes <input type="checkbox"/> No <input type="checkbox"/>	Travel Restrictors: Yes <input type="checkbox"/> No <input type="checkbox"/>	Travel Restrictors: Yes <input type="checkbox"/> No <input type="checkbox"/>	Travel Restrictors: Yes <input type="checkbox"/> No <input type="checkbox"/>	Travel Restrictors: Yes <input type="checkbox"/> No <input type="checkbox"/>
Pole Eyes: Yes <input type="checkbox"/> No <input type="checkbox"/>	Pole Eyes: Yes <input type="checkbox"/> No <input type="checkbox"/>	Pole Eyes: Yes <input type="checkbox"/> No <input type="checkbox"/>	Pole Eyes: Yes <input type="checkbox"/> No <input type="checkbox"/>	Pole Eyes: Yes <input type="checkbox"/> No <input type="checkbox"/>
D Handle: Yes <input type="checkbox"/> No <input type="checkbox"/>	D Handle: Yes <input type="checkbox"/> No <input type="checkbox"/>	D Handle: Yes <input type="checkbox"/> No <input type="checkbox"/>	D Handle: Yes <input type="checkbox"/> No <input type="checkbox"/>	D Handle: Yes <input type="checkbox"/> No <input type="checkbox"/>
Sash Lifts: Yes <input type="checkbox"/> No <input type="checkbox"/>	Sash Lifts: Yes <input type="checkbox"/> No <input type="checkbox"/>	Sash Lifts: Yes <input type="checkbox"/> No <input type="checkbox"/>	Sash Lifts: Yes <input type="checkbox"/> No <input type="checkbox"/>	Sash Lifts: Yes <input type="checkbox"/> No <input type="checkbox"/>
If required, sketch bars below Int' Georgian <input type="checkbox"/> Ext' Astragal <input type="checkbox"/>	If required, sketch bars below Int' Georgian <input type="checkbox"/> Ext' Astragal <input type="checkbox"/>	If required, sketch bars below Int' Georgian <input type="checkbox"/> Ext' Astragal <input type="checkbox"/>	If required, sketch bars below Int' Georgian <input type="checkbox"/> Ext' Astragal <input type="checkbox"/>	If required, sketch bars below Int' Georgian <input type="checkbox"/> Ext' Astragal <input type="checkbox"/>
<div style="border: 1px solid black; padding: 5px; height: 100px;">Toughened Glass Standard</div>	<div style="border: 1px solid black; padding: 5px; height: 100px;">Toughened Glass Standard</div>	<div style="border: 1px solid black; padding: 5px; height: 100px;">Toughened Glass Standard</div>	<div style="border: 1px solid black; padding: 5px; height: 100px;">Toughened Glass Standard</div>	<div style="border: 1px solid black; padding: 5px; height: 100px;">Toughened Glass Standard</div>
Pattern Glass Style If Required: _____	Pattern Glass Style If Required: _____	Pattern Glass Style If Required: _____	Pattern Glass Style If Required: _____	Pattern Glass Style If Required: _____

**Please Specify Colour / Foil Finish Required:**

<b>Profile Colour</b>	<b>Foil In &amp; Out</b>	<b>Foil on White</b>
Standard White <input type="checkbox"/>	Crystal White <input type="checkbox"/>	Chartwell Green <input type="checkbox"/>
	Cream <input type="checkbox"/>	Black / Brown <input type="checkbox"/>
	Anthracite Grey <input type="checkbox"/>	Anthracite Grey <input type="checkbox"/>
	Golden Oak <input type="checkbox"/>	Agate Grey <input type="checkbox"/>
	Irish Oak <input type="checkbox"/>	Rosewood <input type="checkbox"/>
		Irish Oak <input type="checkbox"/>

**Special Instructions**

e.g Bay Layouts

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