

Inquiry

Order

Customer number: _____

Company stamp / address:

Contact person: _____

Telephone: _____

Quotation No.: _____

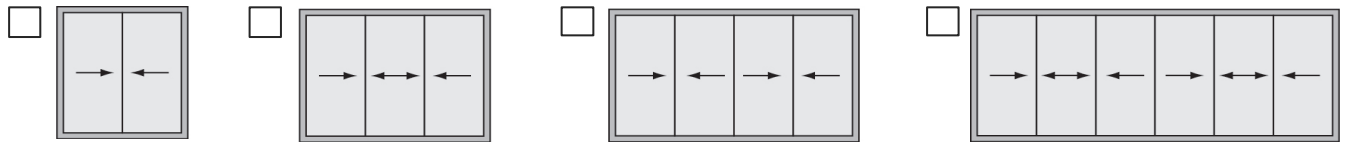
Commission: _____

Number of systems: _____

Dimensions: width: _____ (total unfolding) height: _____ (including possible floor recession)

Number of panels: _____ left _____ right (max. 3 panels in one direction possible)

Type: (attention: Inside view)



Colour: RAL 7016 RAL 9006 RAL 9007 RAL 9016 E6-EV1 Special colour: _____
 Pre anodizing

Glazing: Single glazing, float glass 6 mm
 standard insulated glass 2 x 4/12 cavity Ug 3.0
 without glass - prepared for _____ mm
 special glass: _____ (Please indicate exact designation)

Rail extension: right length L = _____ mm
 left length L = _____ mm

Griffarbe: black white silver

Inside locking: yes left right center

C-pull handle outside: yes

Handle height: H = _____ (Indicate handle height from lower panel edge)

Please enclose floor plan resp. view sketch and remarks (please use inside view)