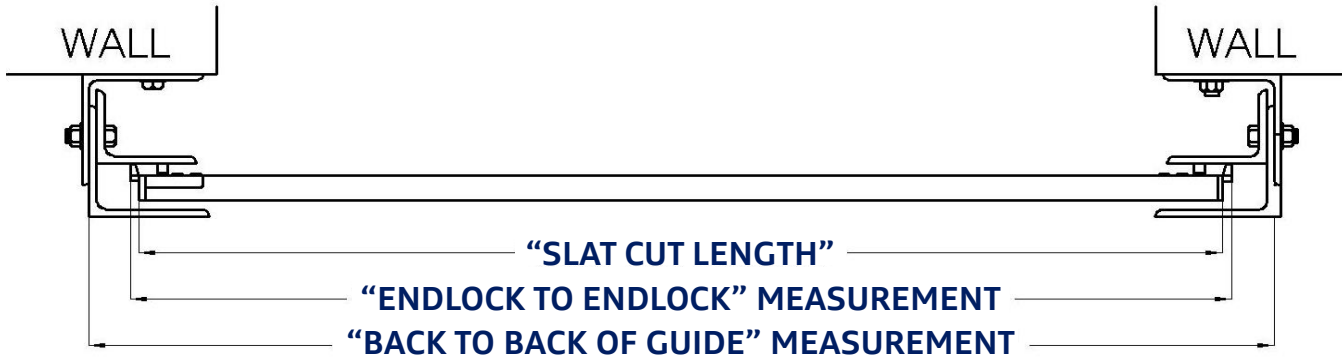




REPLACEMENT SLAT ORDER FORM

Customer #: _____ Date: _____
 Customer Name: _____
 Contact Name: _____
 Email: _____ Phone #: _____
 ASTA Job #: _____ Model: _____



Slat Finish: _____
 Powder Coat RAL # _____
 Opening Width: _____
 Slat Cut Length: _____
 Curtain Gauge: _____ Slat Qty: _____
 Profile: FLAT CURVED
 Endlocks: YES NO
 Windlocks: YES NO
 Windlock Frequency: _____
 Slats: ASSEMBLED LOOSE
 Top Starter Slat: YES NO
 Manufacturer: _____

Insulated Slat: YES NO
 Bottom Bar Dimensions: _____
 (Ex: 2" x 2" 1/8" x 12'3")
 Bottom Bar Material: _____
 (Steel/Aluminum/Stainless Steel)
 Bottom Bar Astragal: YES NO
 Vision Lites Required: YES NO
 Vision Lite Sheet Attached: YES NO
 (VL Qty & Location Shown)

Special Instructions:

Outside Endlock/Windlock to
 Outside Endlock/Windlock Dimensions:

