



Estimate/Order Cover Page

Date: _____

From: _____

Fax to: (800) 423-7610

Email to: orders@special-lite.com

Pages including this one: _____

Number of attachments to email: _____

INSTRUCTIONS: Fill in information by clicking on field, and entering text electronically. Save and print order form for your records. Order form can be faxed to 800-423-7610 or emailed with attachments to orders@special-lite.com. Be sure to name any attachments with same name entered in "Door Mark" field of order form.

Estimate

Purchase Order: Your PO #: _____ **Signature:** _____

- This job was estimated by Special-Lite. Please provide E#: _____
- This job was estimated with the Satellite estimating program. Include Satellite estimate with P.O.
- This job was estimated with the field price book

Special-Lite to provide Submission Drawings at additional cost

Contact: _____	Customer #: _____
Company: _____	Email*: _____
Phone #: _____	
Bill To: _____	Fax #: _____
_____	Cell #: _____

Ship To: _____	Freight: <input type="checkbox"/> Prepaid and added to invoice (Default)
_____	<input type="checkbox"/> Collect (not available if shipped to job site)
_____	<input type="checkbox"/> Third Party (bill to address on file with S-L)
_____	<input type="checkbox"/> Customer Pickup
<input type="checkbox"/> Use Ship-to address on file with Special-Lite	Product is shipped F.O.B. Decatur, MI or Marshall, AR
	AF-100 Door(s) & AF-150 Framing ships FEDEX only

Please indicate when material is needed. ____ / ____ / ____

Date required for shipment: ____ / ____ / ____

END USER

JOB LOCATION

Organization Name: _____	Building Name: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Contact Name: _____	
Contact Phone: _____	Architect Firm: _____
Contact Email: _____	Architect Name: _____