

RETAIL QUOTE INFORMATION FORM

Date: _____

Name: _____

Company: _____

Address: _____

Phone: _____

Project Name: _____

☐ Will Call ☐ Delivery

(If Delivery, provide address): _____

Email: _____

ACRYLIC DOMES

- | | | | |
|-------------|---------------------------------------|------------------------------------------|---------------------------------------|
| Type | <input type="checkbox"/> Curb Mounted | <input type="checkbox"/> Self-Flashing | |
| | <input type="checkbox"/> Fixed | <input type="checkbox"/> Manual Operable | |
| Domes | <input type="checkbox"/> Single Dome | <input type="checkbox"/> Double Dome | |
| Frame Color | <input type="checkbox"/> Mill Finish | <input type="checkbox"/> Bronze Finish | <input type="checkbox"/> White Finish |
| Dome Color | <input type="checkbox"/> White | <input type="checkbox"/> Bronze | <input type="checkbox"/> Clear |

Note: Double Domes will have a clear inner dome.

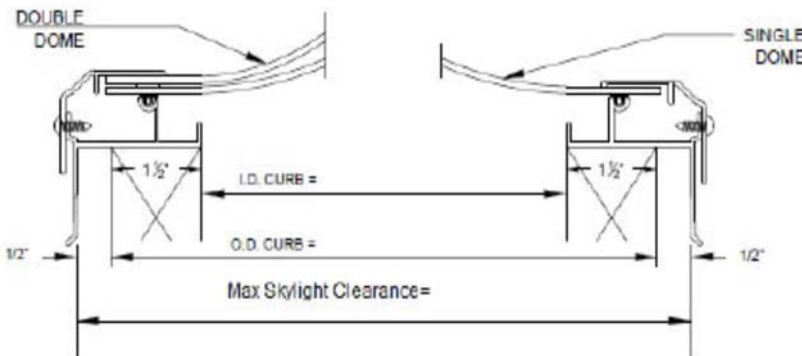
VELUX GLASS UNITS

- | | | | |
|-------|---------------------------------------|------------------------------------------|------------------------------------------------------|
| Type | <input type="checkbox"/> Curb Mounted | <input type="checkbox"/> Self-Flashing | <input type="checkbox"/> Deck Mounted |
| | <input type="checkbox"/> Fixed | <input type="checkbox"/> Manual Operable | <input type="checkbox"/> Electrical / Solar Operable |
| Glass | <input type="checkbox"/> LowE Lami | <input type="checkbox"/> White Lami | |

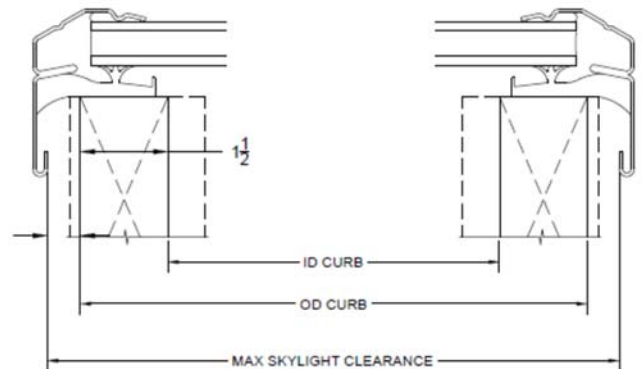
(Please refer to the images below to identify the correct placement of dimensions.)

- | | | | | |
|-----------------|-------------------|-----------------------------|-----------------------------|-------------------------------------------|
| Quantity: _____ | Dimensions: _____ | <input type="checkbox"/> ID | <input type="checkbox"/> OD | <input type="checkbox"/> Max SL Clearance |
| Quantity: _____ | Dimensions: _____ | <input type="checkbox"/> ID | <input type="checkbox"/> OD | <input type="checkbox"/> Max SL Clearance |
| Quantity: _____ | Dimensions: _____ | <input type="checkbox"/> ID | <input type="checkbox"/> OD | <input type="checkbox"/> Max SL Clearance |
| Quantity: _____ | Dimensions: _____ | <input type="checkbox"/> ID | <input type="checkbox"/> OD | <input type="checkbox"/> Max SL Clearance |

DOMES



GLASS



Please email completed form to Sales@SunValleySkylights.com