

QUOTE FORM

Date (mm/dd/yyyy)

Project Name

Quote Reference #

Company:

Contact:

Address:

Phone:

Email:

Please Read

- Please fill out the following glass specification page(s). Use one page per glass type.
- If ordering more than three types of glass, please use an additional form.
- Drawings (DXF or PDF) required for holes, notches, cut outs, or out of square.
- If working with templates: additional scanning charges to be determined.
- Please return the completed form(s) and any attachments to sales@la-glass.com

Special Instructions

Please list any special instructions required for the glass.

GLASS SPECIFICATIONS

Glass code:

Thickenss:

Edgework:

Seamed ☐ Polish ☐ Bevel/Miter ☐

Pattern Direction:

Horizontal / Width ☐

Vertical / Height ☐

Temper:

Yes ☐ No ☐

Safety logo:

Yes ☐ No ☐

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