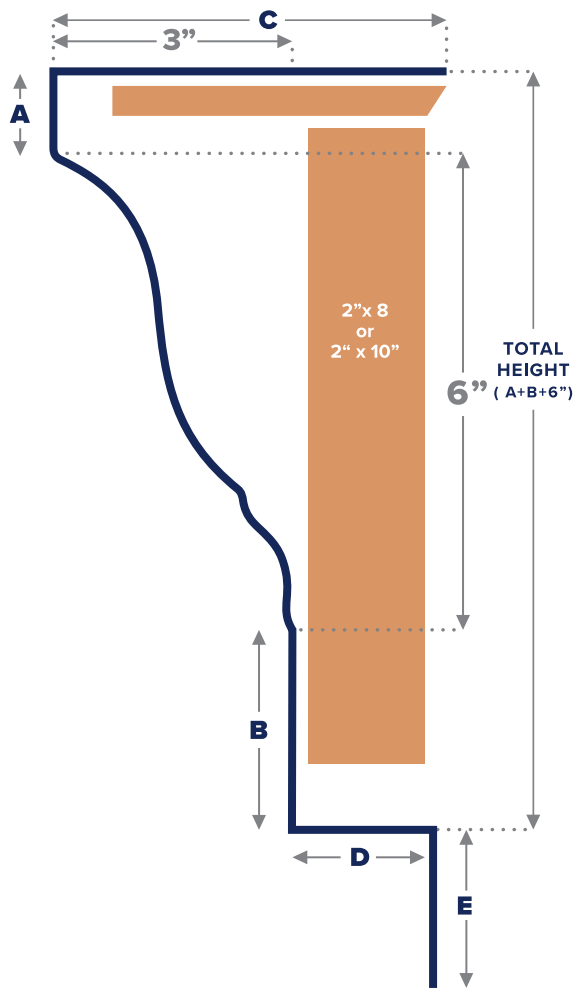
PAXTON COLLECTION

P3 Wall Mount

CROWN MOULDING *P3WMCM23*



CUSTOMER INFO

JOB NAME	
BUSINESS NAME	
CONTACT NAME	

DIMENSIONS *(use figure on left to provide dimensions below)*

A	inches	C	inches
B	inches	D	inches
TOTAL HEIGHT	inches	E	inches

QUANTITIES

A	pcs @	LINEAR FEET *(Min 10ft.)*	
B	pcs @	LINEAR FEET *(Min 10ft.)*	
C	pcs @	LINEAR FEET *(Min 10ft.)*	
D	pcs @	LINEAR FEET *(Min 10ft.)*	
OUTSIDE MITERS pcs Angle 45 / 90		INSIDE MITERS pcs Angle 45 / 90	
RIGHT END CAP pcs		LEFT END CAP pcs	

MATERIAL

ALUMINUM	☐ .032	☐ .024	☐ .019
STEEL	☐ 26g	☐ 24g	
COPPER	☐ 20oz	☐ 16oz	☐ 12oz
ZINC	☐ .7mm	☐ .6mm	☐ .4mm

COLOR

APPROVED

☐ I _____ *(First Name, Last Name)* verify that the type of metal, colors, sizes, dimensions and quantities of this custom sheetmetal order are accurate and/or correct, and hereby give my express approval on behalf of _____ *(Company Name)* to fabricate the products as outlined herein to these exact specifications. Upon signing this agreement I understand that my company assumes liability for any errors, omissions, and/or changes to this order after the submission of this form is received by Helix Metalforming.

_____ *Signature*

_____ *Date*

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