

COMPANY:	REF:
INVOICE TO:	PCODE
ROOF DELIVERY? <input type="checkbox"/> TO:	PCODE
GLASS DELIVERY? <input type="checkbox"/> TO:	PCODE
EMAIL:	TEL:

ROOF REQ'D DATE	
ROOF GLASS REQ'D DATE	

COLOUR

WHITE ☐ MOONDUST GREY/WHITE ☐

GOLDEN OAK/WHITE ☐ 7016 ANTH GREY/WHITE ☐

ROSEWOOD/WHITE ☐ 7016 ANTH GREY BOTH SIDES ☐

KOLORBOND RAL

GLAZING IF GLASS CHOSEN, BLACK SPACER BAR IS PROVIDED

AMBI BLUE 1.0 ☐ AMBI NEUTRAL 1.0 ☐

AMBI SUNSHADE BLUE 1.0 ☐ AMBI CLEAR 1.0 ☐

AMBI AQUA 1.0 ☐ AMBI BRONZE 1.0 ☐

AMBI ULTRA 1.0 ☐ AMBI SATIN PRIVACY 1.0 ☐

UNGLAZED FOR 24/25MM ☐

POLYMER SEALANTS FOR ACTIVE GLASS ROOFS

WHITE ☐ BLACK ☐ NUMBER OF TUBES

ROOF VENT(S) – DRAW POSITION ON ROOF PLAN

MANUAL+BRASS POLE ☐ ELECTRIC WITH SWITCH ☐

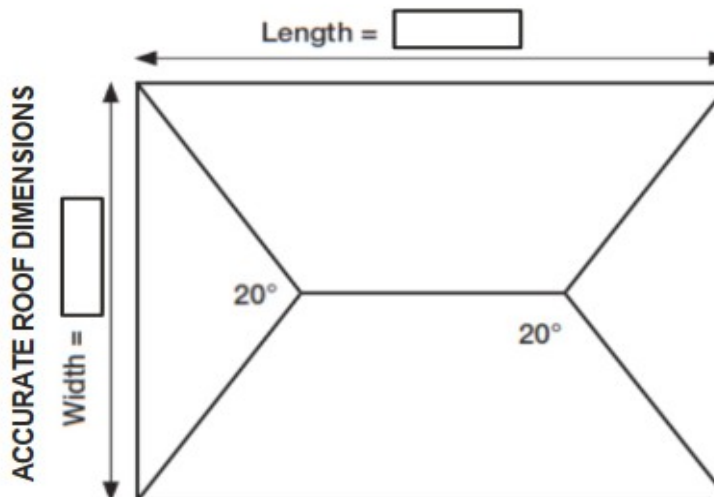
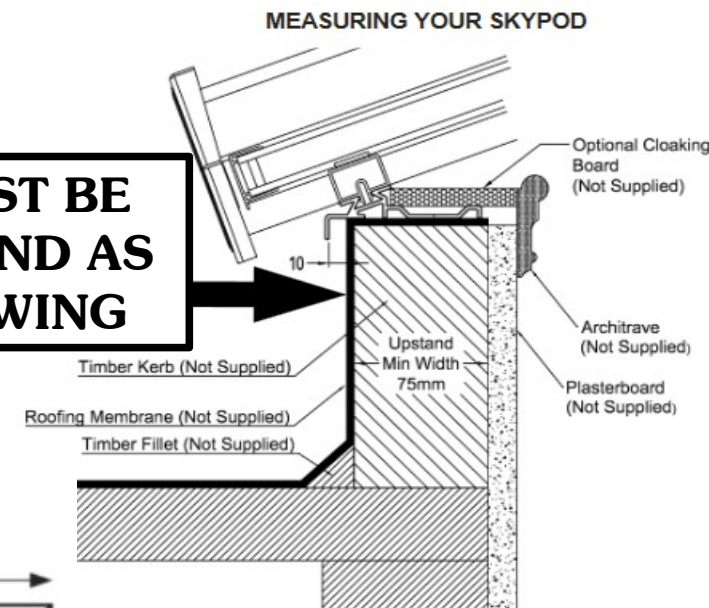
MANUAL+CHROME POLE ☐ CLIMATE (MAX 4 VENTS) ☐

AVAILABLE SUBJECT TO DESIGN OF ROOF

MIN ROOF DIMENSIONS 1250X1900MM

ADDITIONAL COMMENTS

YOUR ROOF SIZE MUST BE THE EXTERNAL UPSTAND AS SHOWN IN THIS DRAWING



MAX SIZE 2750 x 8700

