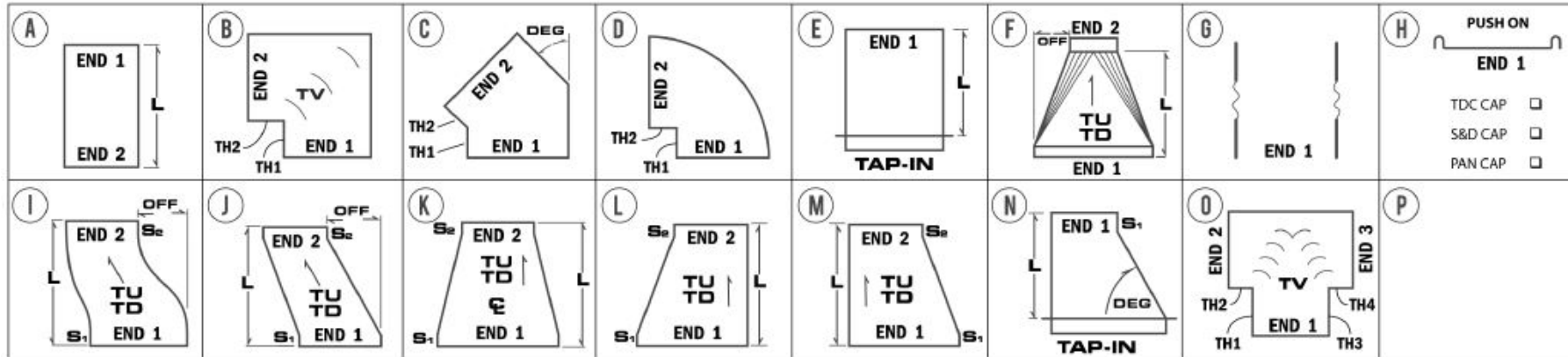


Rectangular Duct Order Form



Date _____
 Customer _____
 Job Name _____
 Date Required _____

P.O. # _____
 Contact _____
 Phone # _____
 Email _____



Pressure Code <input type="checkbox"/> SMACNA 2" Static <input type="checkbox"/> SMACNA ___ Static <input type="checkbox"/> Other	Duct <input type="checkbox"/> Assembled <input type="checkbox"/> Not Assembled <input type="checkbox"/> Snap Lock <input type="checkbox"/> Pittsburgh	End Connectors <input type="checkbox"/> TDF <input type="checkbox"/> Ductmate 35 <input type="checkbox"/> Slip and Drive	Clean Wrap <input type="checkbox"/> YES <input type="checkbox"/> NO	Fitting Offset Legend <input type="checkbox"/> TU=Top Up <input type="checkbox"/> FL=Flat Left <input type="checkbox"/> TD=Top Down <input type="checkbox"/> FR=Flat Right	Liner <input type="checkbox"/> 1" <input type="checkbox"/> 1.5" <input type="checkbox"/> 2"	Shipping <input type="checkbox"/> Customer Pick Up <input type="checkbox"/> CSI Deliver
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#	Tag/Unit #	QTY	Style	L (Length)	End 1	End 2	End 3	Deg	TH1	TH2	TH3	TH4	TV	S1	S2	OFF	TU	TD	Comments	
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