

| PO# | _ SHIP VIA |
|--|----------------------|
| TAG | _ DATE |
| RUSH ORDER YES NO(15% of order or \$25 - whichever is greater) | DISPLAY ORDER YES NO |

| SHIP TO | ACCOUNT # |
|--------------|----------------|
| CONTACT NAME | PHONE FAX |
| ADDRESS | CITY STATE ZIP |

| 1. SIZE: length x depth 2. QUANTITY: | Vanity Sink Styles: Circle One COLOR:COLOR#: | |
|--|---|--|
| 3. COLOR NAME: | COLOR: CUtout*: Manufacturer/Model # Cutout Size No Lav *Template from customer required Standard Lav ADA Lav Small Lav Undermount Round Vessel Decolav® Barclay® China Stainless Steel O Brushed O Polished | |
| * Not available with drop edge 10. EDGE PLACEMENT: Mark all finished edges with the letter X on drawing 11. APRONS: Attached Integral " height (12" max) If attached integral, choose one: Islush Reveal Setback Detached " height (12" max) Apron placement: Front Back Left Right 12. PLYWOOD: Substrate-Full Pad: Yes No NOTES: (Inlays, pinstriping, angles) | Kitchen Sink Styles: Circle One COLOR:COLOR#: Cutout*: Manufacturer/Model # Cutout Size *Template from customer required Overflow is standard: Check here if not needed O Double Bowl Offset Bowl | |
| For Prism Quick Ship Vanity Tops, see form IPC.774 | Large Rectangle Square Small Rectangle | |
| y signing below I certify: I am authorized to place this order. This document will be ac dge the material, models, quantities, colors and prices quoted are accepted. All orde erms and Conditions of InPro Corporation. Shipping charges are based on one shipp equest will result in additional shipping charges. In cases of requested partial shipment UTHORIZED SIGNATURE | rs subject to approval by Financial Services Department. Subject to nent from original quote. Any deviation in shipment per customer | |

| AUTHORIZED SIGNATURE | | |
|----------------------|-------|------|
| PRINTED NAME | TITLE | DATE |

IPC.763/REV.6





