

Measuring Request

Date	Date Reference # or Homeowner's last name: (There is no charge for measuring.)				
Distributor Na	me		(THe	e is no charge for measuring.)	
Location to Se	end Quote to				
City		Sta	ate	Zip	
Contact Name	e		Fax #		
Phone	Email	/DIa ann mus	ida	ail address as this address will	
		be the met	hod of commu	ınication for all install quotes,	
Homeowner		confirmatio	ns, and status	s updates)	
Location of N		Do	v Tima Dha	20	
				ne	
				7in	
•	<u> </u>	Sta	ale	Ζιρ	
	<u> </u>				
	tact Contractor for measurement (i		2)		
•	ame		,		
	er measure?				
-	If "No", estimated date for comple				
(All construction, tile work & sills must be completed prior to measuring appointment to avoid unnecessary trip fee.)					
Wall mounted hinges, for some configurations, may require backing/support behind the tile.					
Product Selection Information:					
	allers are instructed not to accept change	es or modific	ations in the fi	eld. Customers will be advised to	
	ion Guide should accompany the Request for	Measure form	for accurate qu	ioting.	
☐ Location 1	Basco or RODA* Model #		List Price	Installation Price	
_ оршон .	: Frame Finis				
Class Fattern	CLEAN THAT LASTS YES			Office leight.	
	CLEAN THAT LASTS YES	No			
□ Location 2□ Option 2	Basco or RODA* Model #		List Price:	Installation Price :	
	: Frame Finis				
	CLEAN THAT LASTS YES				
☐ Location 3				Installation	
☐ Option 3	Basco or RODA* Model #			Price :	
Glass Pattern	: Frame Finis	sh:		Unit Height:	
	CLEAN THAT LASTS YES	No			
Remove/Dispo	ose of existing enclosure(s):		No []	
orders@bascoshowerdoor.com Phone: (800) 45-BASCO (800-452-2726) Fax: (800) 989-1919					

Please check with your representative for current installation network coverage.