

# Signature Shutters

Account Number

Date

Account Name

Your order reference

Delivery Address

(If left blank, we will assume that delivery is to your **standard** delivery address)

Any additional information

Signature Shutters	Shutter 1	Shutter 2	Shutter 3	Shutter 4	Shutter 5
Colour					
Louvre size					
Panel quantity					
Panel configuration					
Astragal side (if applicable)					
Overall width					
Overall drop					
Shutter style					
Mount type (Inside/outside straight/bay)					
LH frame*					
Bottom frame*					
RH frame*					
Top frame*					
Scribe/filler panel(s)					
Are corner accessories needed? (if applicable)					
Rear cover strip (if applicable)					
Top & bottom rail size					
Tilt bar specification					
Bottom to tilt bar split 1 (if applicable)					
Bottom to tilt bar split 2 (if applicable)					
Divider rail position 1 (if applicable)					
Divider rail position 2 (if applicable)					
Tier on Tier split position (if applicable)					
Catch type					

\* Frame questions include the option to request build out and/or sill plate. **In order to conform to child safety legislation:** please see the Child Safety section in the price guide. If you require any assistance with filling in this form, please contact our sales office either by email; [sales@hallishudson.com](mailto:sales@hallishudson.com) or phone; 01772 202 202