

# ORDER FORM | ALUMINIUM CURTAIN WALLING

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|                                                      |  |                 |                       |
|------------------------------------------------------|--|-----------------|-----------------------|
| <b>Company Name:</b>                                 |  | <b>Cust ID:</b> | <b>Order No. U</b>    |
| <b>Delivery Address:</b><br>(If not Invoice Address) |  |                 | <b>Page</b> <b>of</b> |
|                                                      |  |                 | <b>Ordered On:</b>    |
|                                                      |  |                 | <b>DEL / COL On:</b>  |
| <b>Cust Ref:</b>                                     |  | <b>U / B</b>    | <b>Payment Due:</b>   |

## -----'VIEWED FROM OUTSIDE'-----

| BEADING                           | GLASS                             | BEAD                         | SASH                     | OUTER FRAME                  | GASKET                         | LOCKING | PROFILE SYSTEM |
|-----------------------------------|-----------------------------------|------------------------------|--------------------------|------------------------------|--------------------------------|---------|----------------|
| INTERNAL <input type="checkbox"/> | GLAZED <input type="checkbox"/>   | <input type="checkbox"/> STD | <input type="checkbox"/> | STD <input type="checkbox"/> | BLACK <input type="checkbox"/> |         |                |
| EXTERNAL <input type="checkbox"/> | UNGLAZED <input type="checkbox"/> |                              |                          |                              |                                |         |                |

**RAL COLOUR –                      OUTSIDE:                                              INSIDE:**

Location **FRAME DRAWING: OUTSIDE VIEW**

Internal Dimensions to be given to all layouts above

|                                                                |                        |
|----------------------------------------------------------------|------------------------|
| <b>ORDER VALUE:</b>                                            | <b>NETT:</b> £ _____   |
|                                                                | <b>V.A.T.:</b> £ _____ |
|                                                                | <b>TOTAL:</b> £ _____  |
| I agree that the balance will be paid in full by the due date: |                        |
| Signed _____                                                   | Date _____             |