

DEALER ORDER FORM

HALF CIRCLE (24" to 144" dia.)

QUARTER CIRCLE (12" to 72" rad.)

SOLD TO: Business: _____ Customer #: _____						SHIP TO: _____ same as sold to _____ see below Name: _____					
Address: _____						Address: _____					
City: _____		State: _____		Zip: _____		City: _____		State: _____		Zip: _____	
Phone: _____			Fax: _____			Shipping comments: _____ Residential _____ Commercial _____					
Order placed by: _____			PO #: _____								

Item#	Qty.	Window Frame Depth	Window Sill Depth	Half Circle (✓)	Quarter Circle		Measurements (Z) Qtr. Circle Only			Shade Information				Track Color	Retail Unit Price	Retail Total
					L Hand (✓)	R Hand (✓)	Width (X) Dim.	Height (Y) Dim.	Arch Rad. (Z) Dim.	Shade Brand	Shade Collection	Shade Style	Color & Number			

Options																
Item#	Qty.	Sill Extender		Sill		Other (explain)	Motorization Package									
		Depth	Width	Depth	Width		#1	#2	#4	#5	#6					

Window Sill and Frame composition: _____ wood, _____ drywall, _____ other: _____ ***Cord loop length: _____ Measurement from floor to top of window sill is _____. Ideally the bottom of cord loop is 48" off floor. *** Cord loop tension brackets must be attached to walls or moldings for safety. Are there any obstructions beneath the arch that may interfere with the pull cord? _____ Yes _____ No If yes please contact Omega. CREDIT CARD AUTHORIZATION SIGNATURE: _____ Credit Card information to be given to Sales Department over the telephone ORDER AUTHORIZATION SIGNATURE: _____ Please note: Pietroske Enterprises LLC custom fabricates the ADJUST-A-VIEW® to your exact specifications. We cannot accept responsibility for errors in ordering, cancellations, or changes after the order is in production.	Subtotal Discount Subtotal Tax **Freight Order Total Less Payments Total Due
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Patent Pending
Form Revised: 24 Nov 2024

**Freight FOB Manitowoc, WI
Collect or Prepaid & Charge

Office Use Received Date: _____ Received by: _____ REP _____ Order Date: _____	Payment Terms: <u>Prepay w/order</u> AAV Order # _____ Vendor P.O. # _____ Date Shipped: _____ AAV Invoice # _____	Make Payments to: Pietroske Enterprises LLC 935 East Albert Drive Manitowoc, WI 54220	(800) 874-9594 Fax: (920) 717-0139 Email: sales@adjustaview.com www.adjustaview.com
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