

INSTRUCTIONS

If you are unsure of any question, just choose the [I want to discuss] or [Not important] option for that section.
If you have extra information, special requirements, etc. that are not addressed in this form, you can add them in the comments section at the end, or ask us to call you for clarification.

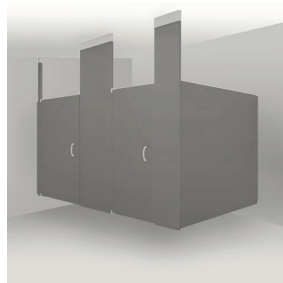
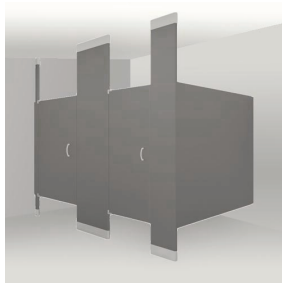
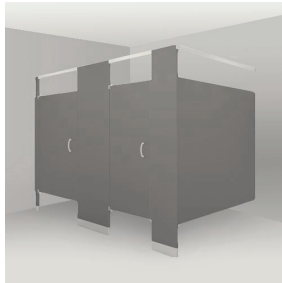
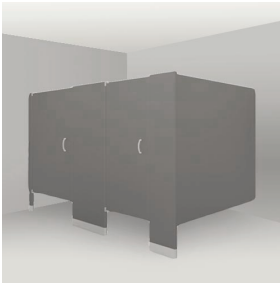
WHEN YOU HAVE FINISHED FILLING OUT THIS FORM, SIMPLY SAVE IT AND ATTACH IT TO AN EMAIL TO: sales@restroomdirect.com

MANUFACTURER



- I want to discuss. I have questions.
- Not important. Choose for me.
- Pick the least expensive option.

CONFIGURATION



- I want to discuss. I have questions.
- Not important. Choose for me.
- Pick the least expensive option.

MATERIAL

	Powder Coated	Stainless Steel	Solid Plastic	Black Core Phenolic	Color-Thru Phenolic	Plastic Laminate	Solid Surface	Dur-A-Tex	Alpaco Collection	Bradmar
Any Manufacturer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- I want to discuss. I have questions.
- Not important. Choose for me.
- Pick the least expensive option.

Comments

HARDWARE

Door Hinge Type



CONCEALED



WRAP AROUND



CONTINUOUS

- I want to discuss. I have questions.
- Not important. Choose for me.
- Pick the least expensive option.

Latch Type



STANDARD



BARRIER FREE



OCCUPANCY

Hardware Material



CHROME PLATED (POLISHED)

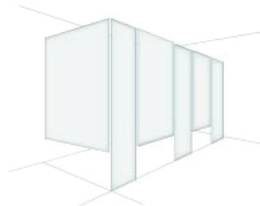


STAINLESS STEEL (BRUSHED)

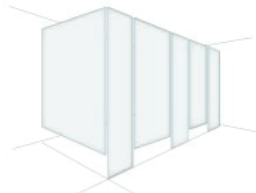
NOTE: There may be other / additional hardware options available for specific manufacturers. If you want to specify them or ask about them, just put notes in the Comments field to the right.

Comments

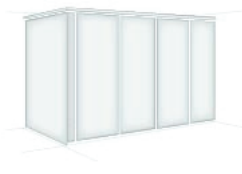
PRIVACY LEVEL



STANDARD



ENHANCED



EUROPEAN / MAX

Partition manufacturers will have various privacy packages and add-ons. Most offer a Standard package, one or two middle packages, and a maximum privacy package (often referred to as European Style). Not all privacy options are available for all materials, so you will want to consider both at the same time. As you would expect, the higher the level of privacy, the more expensive the partitions.

COLORWAY

Here are some basic choices for color which would be applicable for most manufacturers. If you have a specific (exact) color in mind from a particular manufacturer, you can specify it in the Comments section.

See the partitions section on our website and choose a manufacturer to see specific colors, textures, etc.

Almond	Gray (Medium)	White
Beige / Cream	Gray (Dark)	Black
Black	Green (Pale)	Silver
Blue (Medium)	Green (Olive)	
Blue (Navy)	Green (Forest/Hunter)	
Brown	Red	
Gray (Light)	Tan / Khaki	

Comments

ROOM STYLE

Select your room layout.

Don't worry about the number of stalls here, just note the basic partition arrangement.

LAYOUT NUMBER

ROOM STYLE

Indicate number of each type of stall.



STANDARD

ADA (WHEEL CHAIR)

AMBULATORY

ADA & AMB

Comments

List obstructions, cut-outs, etc.

DELIVERY DETAILS

Your Contact Info

Name

Email

Phone Number

Fax

Delivery Address

Company

Site Contact Name

Address Line 1

Address Line 2

City, State, Zip

On-site Phone

Additional Information / Drawings, etc.