



Coil and Flat Sheet Order Form

CUSTOMER: _____ TEMPLE QUOTE/INVOICE #: _____

DATE ORDER PLACED: _____ TIME ORDERED PLACE: _____

ORDER PLACED BY: _____

COILS FOR PRODUCTION: YES NO

COIL WIDTH: _____

COIL LENGTH: _____

VINYL: YES NO

OF SHEETS: _____ 48"X120" w/VINYL: _____

CUSTOM SIZE SHEETS: _____

SHEETS FOR PRODUCTION: YES NO

MATERIAL: 24 GAUGE GALVALUME COLOR: _____

MATERIAL: 22 GAUGE GALVALUME COLOR: _____

MATERIAL: 032 ALUMINUM COLOR: _____

MATERIAL: 040 ALUMINUM COLOR: _____

MATERIAL: 050 ALUMINUM COLOR: _____

ORDER TAKEN BY: _____ DATE: _____

MATERIAL PROCESSED BY: _____

MATERIAL STORED IN LOCATION: _____