



# Request for Quote

F A B T E X

# DRAPERIES

**DATE OF REQUEST:****Quote to Customer:**

Customer Address:  
 Customer City/State/Zip:  
 Customer Contact Name:  
 Tel.:  
 Fax:  
 Cell:  
 Email:

**PROJECT TITLE:****Property Name:**

Property Address:  
 Property City/State/Zip:  
 Property Contact Name:

**SCOPE OF WORK**

- New Construction     Renovation  
 # of Rooms: \_\_\_\_\_  
 Guest Rooms     Lobby  
 Meeting Rooms     Other: \_\_\_\_\_

**REQUESTED DELIVERY DATE:** \_\_\_\_\_**SPECIFICATIONS (Check and describe as required)**

- Pinch Pleated**     200% fullness (typical)  
                            250% fullness  
                            Other: \_\_\_\_\_

- Ripplefold**     80% fullness (equal to 200% pinch pleat)  
                            100% fullness (equal to 225% pinch pleat)  
                            120% fullness (equal to 250% pinch pleat)

**Other**     \_\_\_\_\_

- Linings**     2-Pass Blackout Grey/White (typical)  
                    2-Pass Blackout Grey/Ecru  
                    3-Pass Blackout White/White  
                    3-Pass Blackout White/Ecru  
                    Cotton/Poly (Non-Blackout)  
                    Other: \_\_\_\_\_  
                    Unlined

**FABRICS:**     Include in quotation     COM (Customer will supply)

Face Fabric (Mill)			Contrast Fabric(s) (Mill)		
Basecloth			Basecloth		
Pattern			Pattern		
Color			Color		
Content			Content		
Width			Width		
Repeats	Horiz: _____	Vert: _____	Repeats	Horiz: _____	Vert: _____

**QUANTITIES / MEASUREMENTS**

Qty	Rod Width	x	Finished Length	Re- turns	Qty	Rod Width	x	Finished Length	Re- turns	Qty	Rod Width	x	Finished Length	Re- turns
		x					x					x		
		x					x					x		
		x					x					x		

- Draw**     Center pairs  
 One-way panels  
 Offset pairs  
 Stationary Panels  
 Added description: \_\_\_\_\_

- Installation**     Non-Union     Union  
 No installation (make & ship)  
**Field Measure**     Yes     No  
**Demolition**     Removal of existing drapery required  
**ADA Batons**     Required (# of rooms \_\_\_\_\_)

- Hardware**     Existing Wall Mount  
 Existing Ceiling Mount  
 New Wall Mount Required  
 New Ceiling Mount Required

- Attaching to:**     Drywall  
 Concrete  
 Other: \_\_\_\_\_

- Operation**     Baton (describe, if required) \_\_\_\_\_  
 Cord (describe, if required) \_\_\_\_\_

- Decorative Hardware**     (describe style, finish, finial type, etc.) \_\_\_\_\_

**Notes:**