



5000 Paschall Avenue • Philadelphia, PA 19143  
**610-622-7211 • FAX 610-284-4323**

Order Name/No. \_\_\_\_\_  
 Date \_\_\_\_\_

2015  
**Convex  
 Awning  
 Order Blank**

FOR OFFICE USE ONLY

CXC \_\_\_ / CXR \_\_\_

Sold To \_\_\_\_\_  
 Address \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, St, Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Contact \_\_\_\_\_

Mfr Date \_\_\_\_\_

Ship Date \_\_\_\_\_

\_\_\_ OC  
 \_\_\_ FC  
 \_\_\_ GC

SM,SV,Sc

\_\_\_ Yds PVC,SS

\_\_\_ Yds Val Grfx

\_\_\_ PVC Lts/Ceil

\_\_\_ Lts CO

\_\_\_ Ceil BR,VW

\_\_\_ Other Sub-Total

Disc

\_\_\_ Frt. Free Frt

**TOTAL**

Ship To \_\_\_\_\_  
 Address \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, St, Zip \_\_\_\_\_

Ship By (check one)

\_\_\_ Will Call \_\_\_ UPS \_\_\_ Truck \_\_\_ Del'y.

Payment by

\_\_\_ COD \_\_\_ Std.

Special Notes or Instructions - on other side or attach separately

Fabric Name & No. \_\_\_\_\_

Valance Fabric (if other) \_\_\_\_\_

PVC-insert Color \_\_\_\_\_

Wrapped PVC-insert Color \_\_\_\_\_

Scallop Design \_\_\_\_\_

Color Binding \_\_\_\_\_

Graphics \_\_\_ Yes \_\_\_ No (if yes, specify)

Awning/ Frame Complete \_\_\_ Yes \_\_\_ No

Recover Only \_\_\_ Yes \_\_\_ No (if yes, supply frame)

Construction Style \_\_\_ Economy Welded \_\_\_ Back Lit

\_\_\_ EconoLux Welded \_\_\_ Knock-Down

\_\_\_ Deluxe Welded \_\_\_ Other

Fabric Attachment \_\_\_ Staple \_\_\_ Lace-on

If Back Lit, install \_\_\_ Lights \_\_\_ Ceiling

Lacing Cord Color \_\_\_ White \_\_\_ Black

Bow & Rafter Style \_\_\_ Yes \_\_\_ No

Cut Out (see sketch) \_\_\_ Yes \_\_\_ No

Lace-on Type (if welded) \_\_\_ Std. \_\_\_ Other (specify)

Tie Down Bar (if K-D) \_\_\_ Yes \_\_\_ No (if yes, specify below)

\_\_\_ 2-1/2" (old) \_\_\_ 4" (std) \_\_\_ other (specify)

Pipe Size \_\_\_ 1/2" \_\_\_ 3/4" \_\_\_ 1" \_\_\_ 1" Sq

# Bows \_\_\_ # Spaces \_\_\_

Bow Spacing (incremental, left to right)

Valance Weight Pipe (front) \_\_\_ Yes \_\_\_ No

Valance Weight Pipe (sides) \_\_\_ Yes \_\_\_ No

#555 Track Top \_\_\_ Yes \_\_\_ No

Head Rod Top \_\_\_ Yes \_\_\_ No

Mounting to \_\_\_ wall \_\_\_ ceiling

# Inside Arms	Quantity	Drop (2-3)	Proj (3-4)	Roof(2-4)	Width(1-2)	Valance

**DO NOT WRITE IN THIS SPACE**

