

DATE ____/____/____

REQUEST FOR QUOTATION (OR ON-SITE MEASURE-UP)



Name: _____

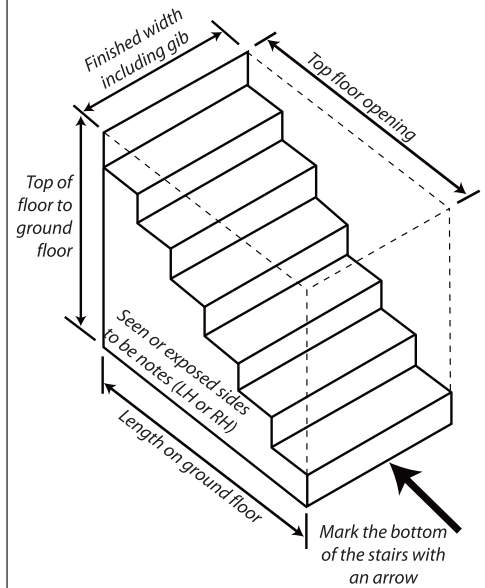
Your address: _____

Site address: _____

Phone: _____ Fax: _____ E-mail: _____

Freephone 0800 867 359
 8 Cypress Street, Tauranga
 PO Box 2505 Tauranga 3140
 Phone 07 578 1414
 Fax 07 578 1415
 Email sales@topflyte.co.nz

Please sketch your stair here:



	Flight #1	Flight #2	Flight #3
Top Floor to ground floor			
Width between gib walls			
Top floor opening sizes			
Length on ground floor			
Ground floor to under ceiling			
Bullnose double or single			
Radius if stair is curved			

tick one L/H Both R/H

Double bullnose treads

Three winder corner

← RH

Wall framing (if any)

tick one L/H Both R/H

Single bullnose treads

Two winder corner

→ LH

Please fax back to 07 578 1415 • If you require any clarification on the above, please call us on 0800 867 359