

STRAIGHT-EAVE (SE) SOLARIUM FAX ORDER FORM

Approximate installation time frame

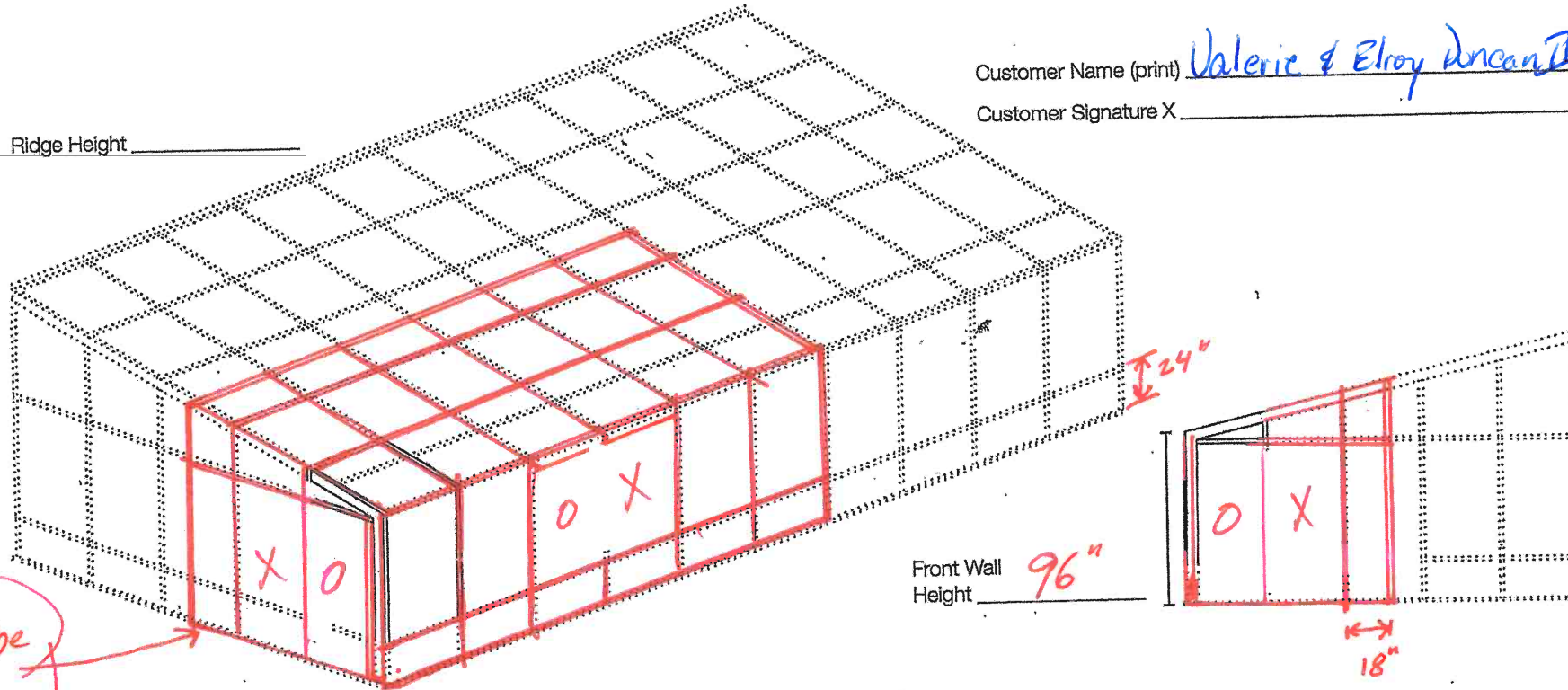
after permit received, if required,
weather permitting _____

Customer Initials _____

Customer Name (print) Valerie & Elroy Duncan II

Customer Signature X _____

Ridge Height _____



3rd Bay To be 18" 1 & 2 bays

Projection Left Gable ("A" Wall) _____

Length Front Wall ("B" Wall) 216"

Projection Right Gable ("C" Wall) _____

of Bays Deep 3

of Bays Long 6

Left Gable Yes No

Right Gable Yes No

Kneecap! Basewall Height 24"

List Modified or Custom Unit Features — Illustrate and explain, if necessary, above or on the previous page. _____

Using a pen or pencil, locate and connect all of the points corresponding to the specifications of the desired unit. Do so for each gable end, roof, and skylight. Indicate the location and the type of each window, door and/or skylight. After outlining your unit, fill in and circle all appropriate information marked "model."