SHUTTER ORDER FORM

AmericanA	
DEVENCO	

NAME:ADDRESS:						DATE:										s
							SHIP TO A	DDRESS (IF I	DIFFERENT)				-			
CITY: STATE: ZIP CODE:						ADDRESS:								_		
PHONE:						CITY:			STATE:		ZIP CODE:			_		
EMAIL:					-											
Type of Shutter:	torian Lo	uvered D P	lantation Lo	ouvered	☐ Caribl	pean Louvere	ed 🗆	Raised/Flat	t Panel	☐ Brownstone ☐	Pocket	Shutter	□ Ro	lling Sh	utter	
Hardware:				For Double		Hanging System										
		Single Hung	Opening I	Opening Dimension		Lockrail	Total Panels in Width	Fold Direction	Paint or Stain	Color Information (Please provide dry stain sample or color name/number to match)	Hanging Stops (no additional charge)		Butt	Ou	ıtside Mount	
Room/Descriptor Qty	Double Hung Café (Bottom Half)	Width	Height	Top Location Bottom (if applicable)	Y/N	Height					Hinges	Y/N	(Standard or Low-Profile)	3-sided 4-sided		
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