



Insulated Quote / Order Form Fax Completed Form

to: (626)-968-9094

OR E-MAIL @
FASTGLASS@PRLGLASS.COM

251 Mason Way, Industry Ca 91744 Phone: (800) 433-7044 Fax: (626) 968-9256 www.prlglass.com

Date: ____/____/____

Firm Name _____ P.O # _____

Phone #: _____ City _____ State _____

Job Name: _____

Annealed Tempered Bug Cobb No Bug

Over all Thickness: _____ **Spacer:** Clear Bronze

Glass Thickness: 1/8" over 1/8" 3/16" over 3/16" 1/4" over 1/4" Other _____

Glass Type: Clear over Clear Clear over Bronze Clear over Grey Clear over Low E (Sungate 500)

Bronze over Low E (Sungate 500) Grey over Low E (Sungate 500) Clear over SN68 Low E

Bronze over SN698 Low E Grey over SN68 Low E Other _____ over _____

Texture on Surface: #1 #2 #3 #4 **Reflective on Surface:** #1 #2 #3 #4

Unit is looking at _____ Glass Side

Grid Size: 5/8" Flat 3/4" Flat 1" Sculptured **Grid Color:** White Bronze

Grid Pattern: _____ Custom Location (per Customers Sketch)

Shape: Rectangle Out Of Square Arch Top Other _____

Sandblast: Full / 1-Side Custom (Per Customer Sketch)

Opaci- Coat Spandrel (units must have silicone seal): Single Coat Double Coat

Black (1-818) Light White (0-0186) Primary White (0-1060) Evergreen (2-0225)

Harmony Bronze (4-822) Other _____

Add on's: Silicone seal Breather Tubes Aragon Gas

Quantity: _____ Size: _____

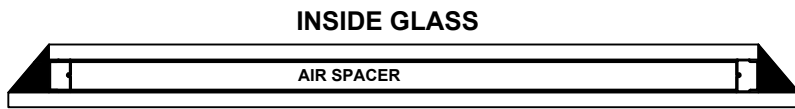
Quantity: _____ Size: _____

Quantity: _____ Size: _____

Quantity: _____ Size: _____

Quantity: _____ Size: _____

(GLASS #2) _____



INSIDE GLASS

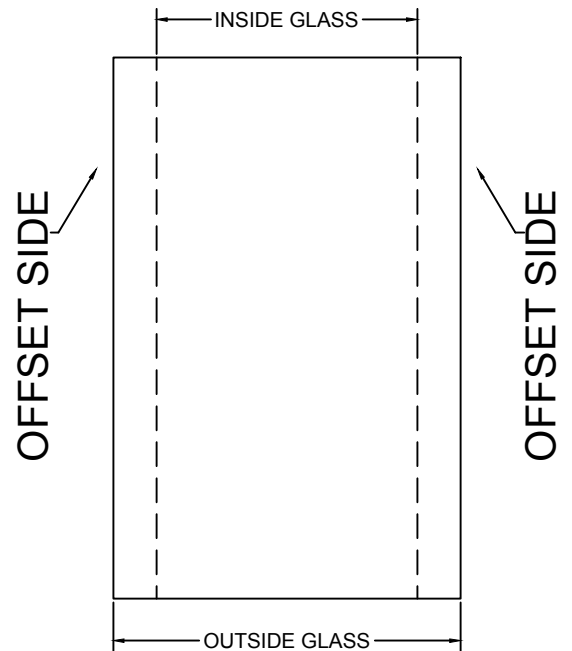
AIR SPACER

OUTSIDE GLASS

(GLASS #1) _____

FACE

LOOKING @ FACE
GLASS #1



GLASS #1 SIZE: _____

GLASS #2 SIZE: _____

OFFSET MEASUREMENT

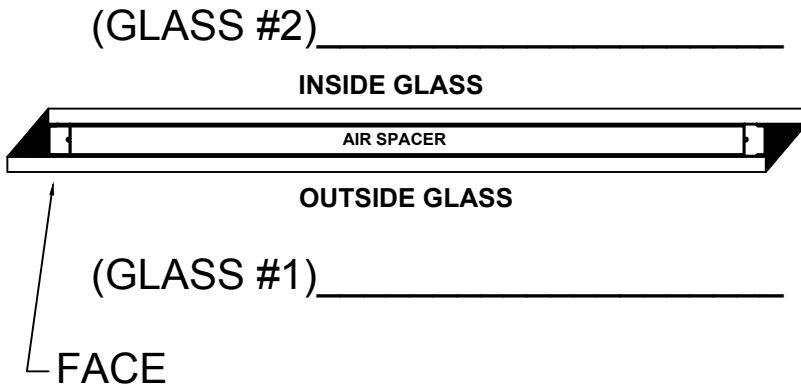
LEFT SIDE: _____

OFFSET MEASUREMENT

RIGHT SIDE: _____

MARK # _____

(BACK & FACE MITERS)



GLASS #1 SIZE: _____

GLASS #2 SIZE: _____

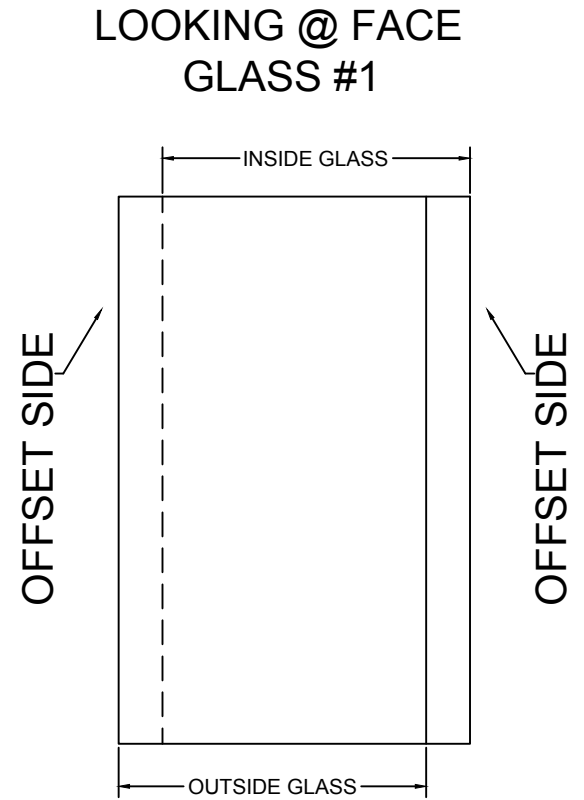
OFFSET MEASUREMENT

LEFT SIDE: _____

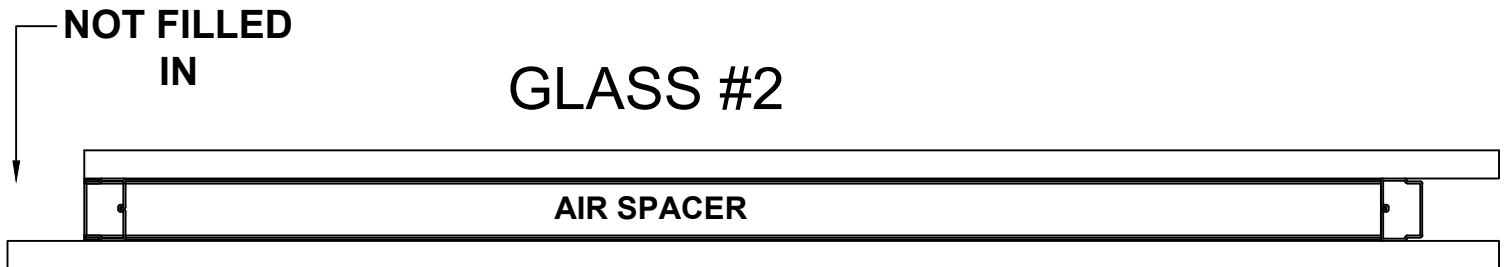
OFFSET MEASUREMENT

RIGHT SIDE: _____

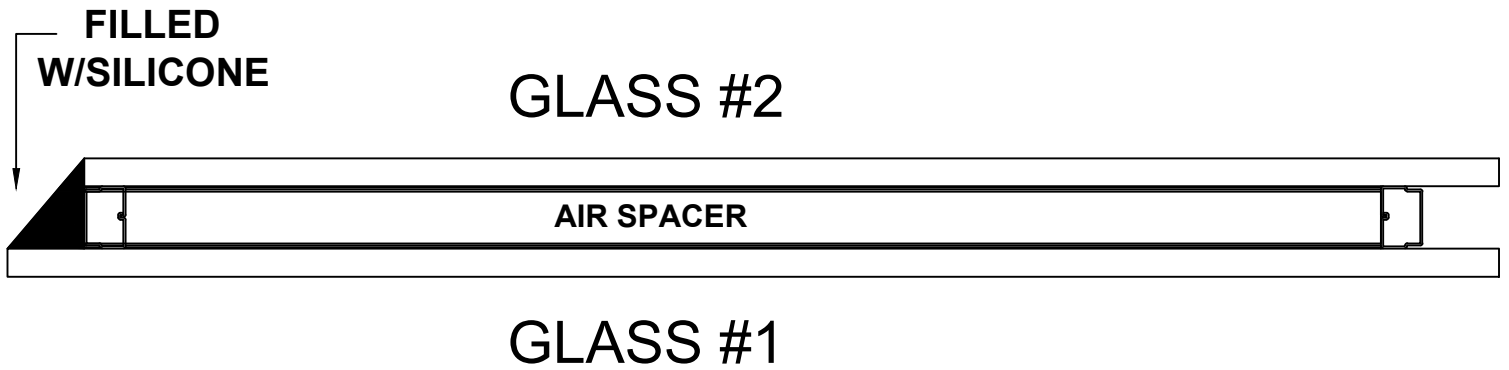
MARK # _____



OPTION A:

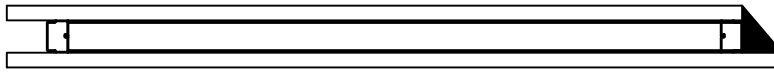


OPTION B:



OFFSET A

(GLASS #2) _____



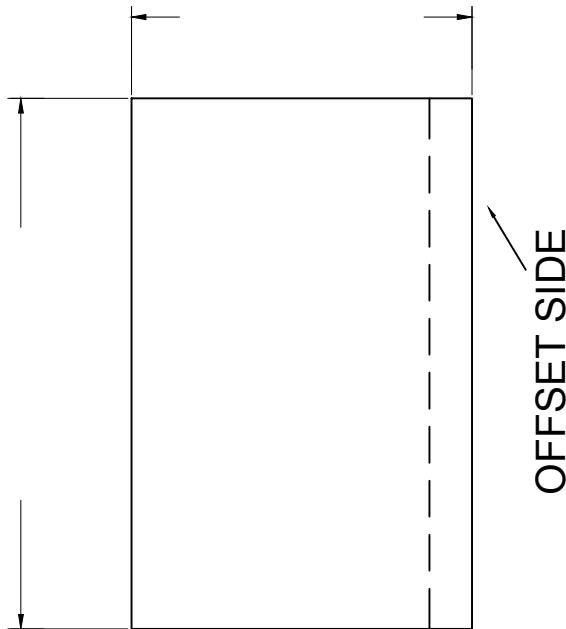
(GLASS #1) _____

FACE

GLASS #1 SIZE: _____

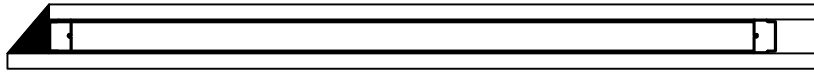
GLASS #2 SIZE: _____

LOOKING @ FACE
GLASS #1



OFFSET B

(GLASS #2) _____



(GLASS #1) _____

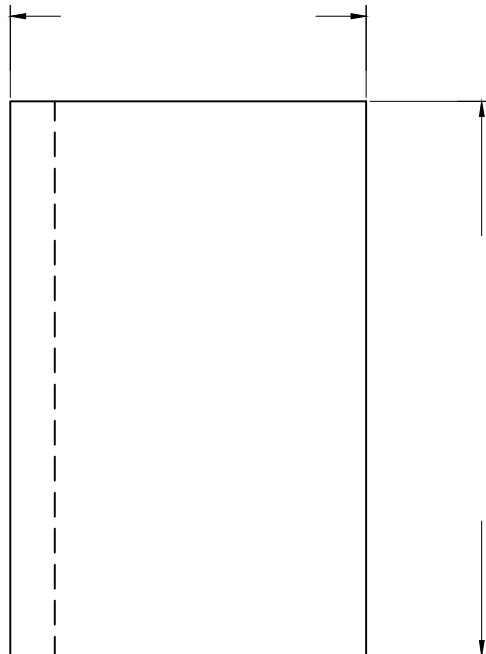
FACE

GLASS #1 SIZE: _____

GLASS #2 SIZE: _____

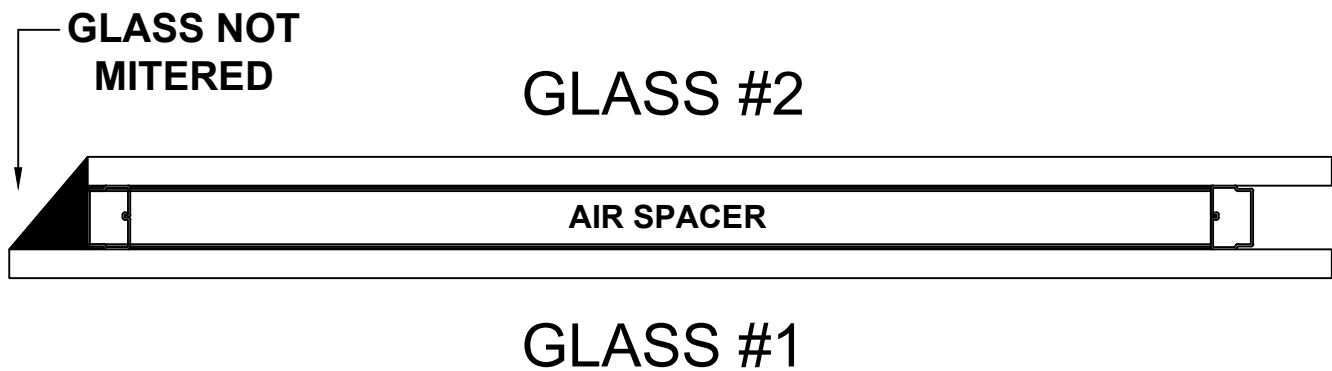
LOOKING @ FACE
GLASS #1

OFFSET SIDE

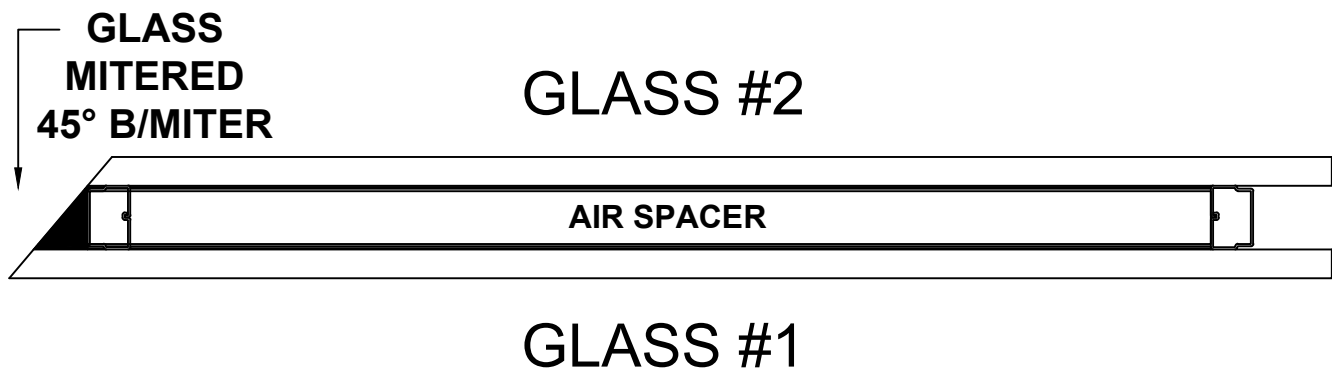


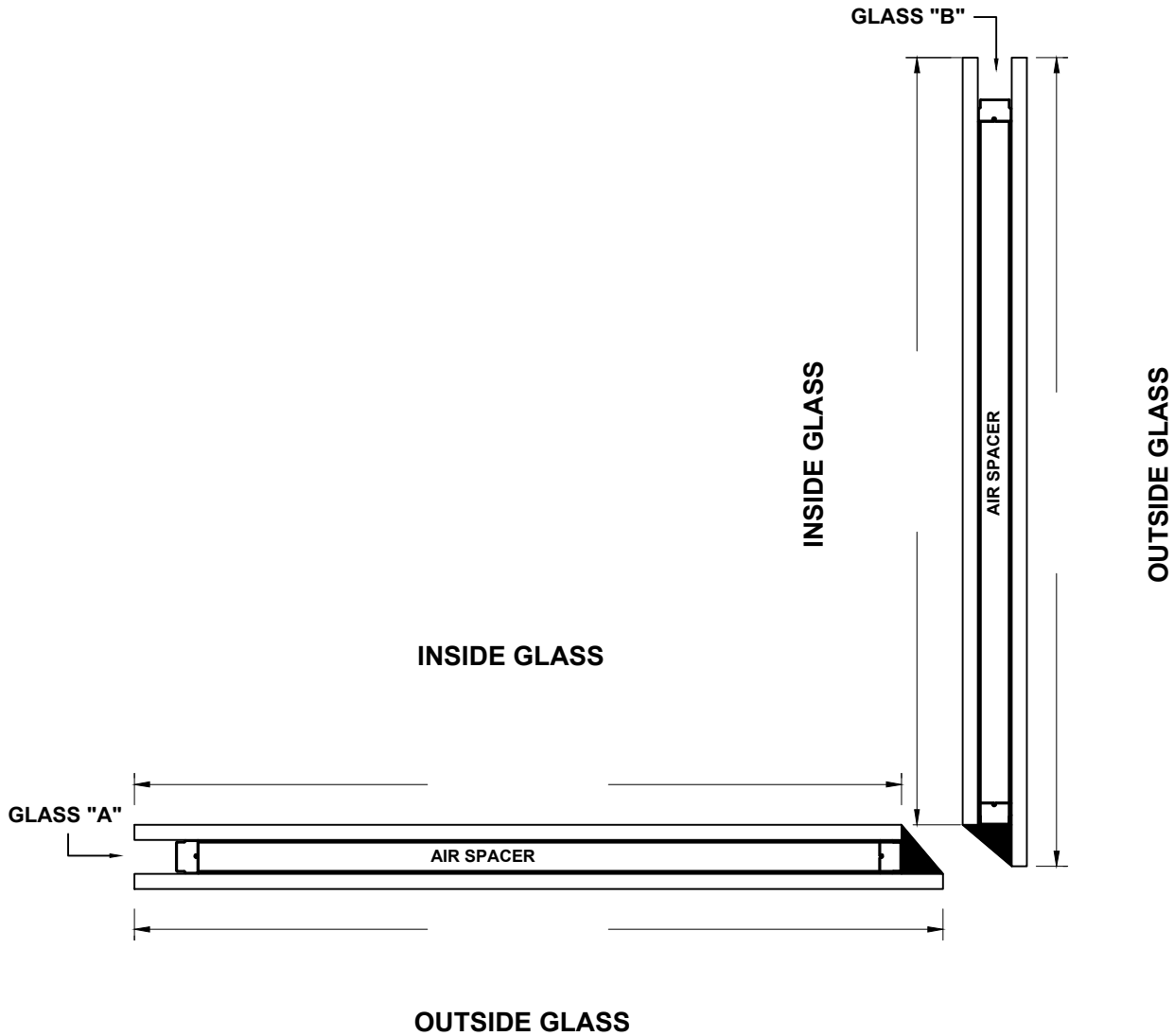
(STANDARD VS GLASS MITERED)

OPTION A:



OPTION B:





GLASS A: OFFSET ON RIGHT

GLASS #1 _____

SIZE: _____

GLASS #2 _____

SIZE: _____

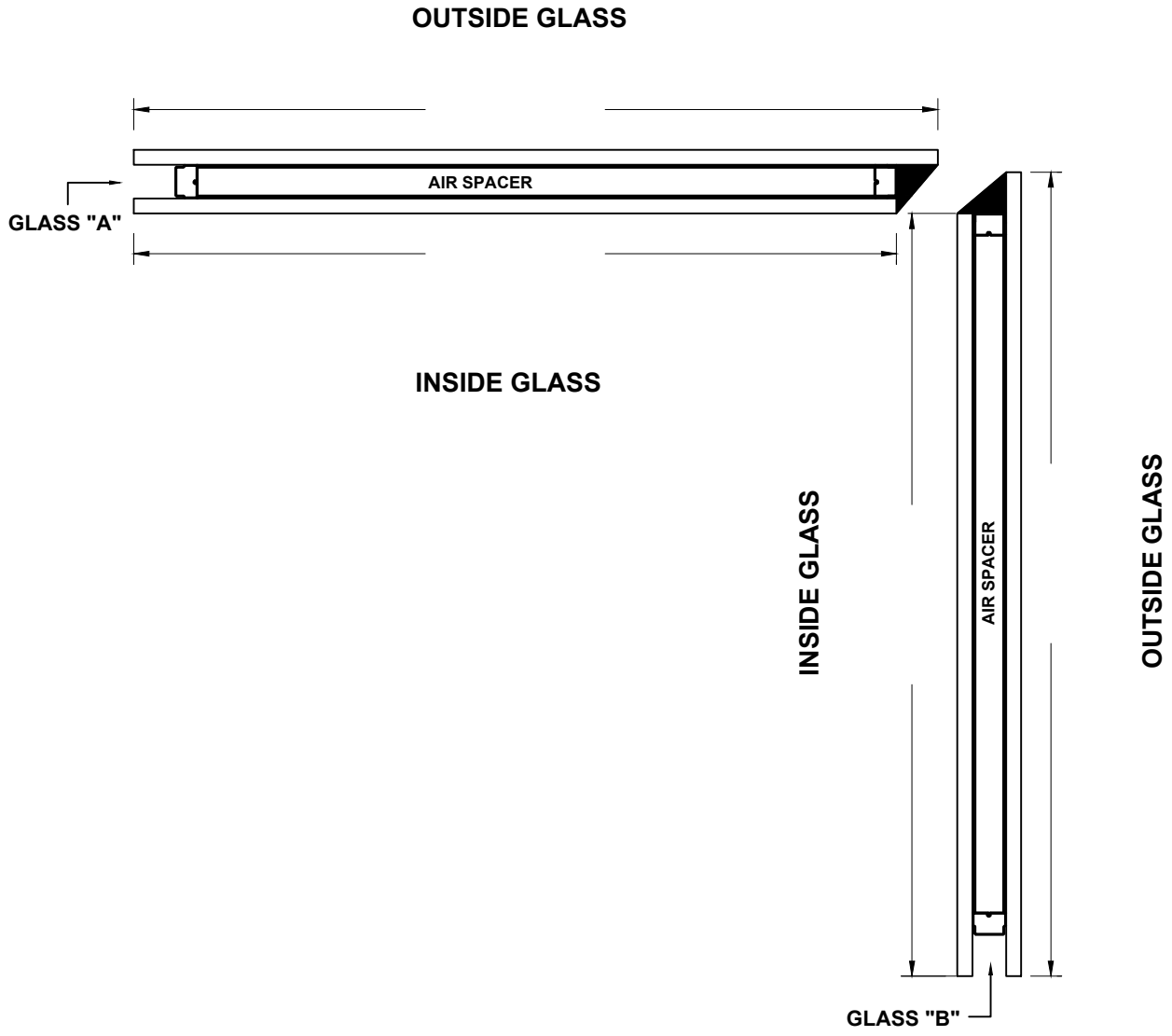
GLASS B: OFFSET ON LEFT

GLASS #1 _____

SIZE: _____

GLASS #2 _____

SIZE: _____



GLASS A: OFFSET ON RIGHT

GLASS #1 _____

SIZE: _____

GLASS #2 _____

SIZE: _____

GLASS B: OFFSET ON LEFT

GLASS #1 _____

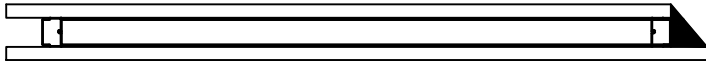
SIZE: _____

GLASS #2 _____

SIZE: _____

OFFSET A

(GLASS #2) _____



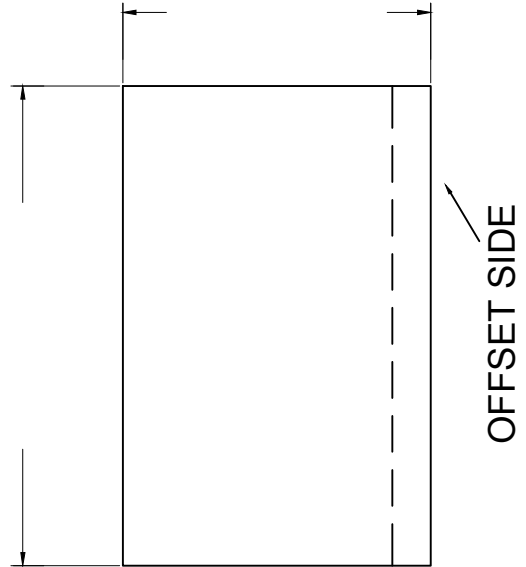
(GLASS #1) _____

FACE

GLASS #1 SIZE: _____

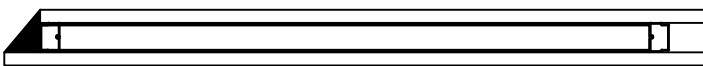
GLASS #2 SIZE: _____

**LOOKING @ FACE
GLASS #1**



OFFSET B

(GLASS #2) _____



(GLASS #1) _____

FACE

GLASS #1 SIZE: _____

GLASS #2 SIZE: _____

**LOOKING @ FACE
GLASS #1**

