

**FLASHING ORDER FORM**

CLIENTS NAME:	PO No:
DELIVERY ADDRESS:	
CONTACT NAME:	CONTACT No:

NOTE : DETAIL ONLY ONE COLOUR PER PAGE			OFFICE USE ONLY
STEEL / ALUMINIUM <hr/> THICKNESS <hr/> COLOUR <hr/> QUANTITY <hr/> LENGTH <hr/> GIRTH <hr/> BUTT STRAPS (100mm)	<input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	DETAIL ID MARK:          <p style="text-align: center;">ALL SAFE EDGES ARE 12mm</p>	SALES OFFICE <hr/> LINE NUMBER <hr/> OPERATOR QUALITY CHECK <hr/> PROFILE CHECK <hr/> COLOUR CHECK <hr/> QUANTITY CHECK <hr/> SIGNED (OPERATOR) <hr/> SIGNED (SUPERVISOR)
ALL FLASHINGS PRODUCED STRAIGHT UNLESS OTHERWISE ORDERED			

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