

TALBERT ARCHITECTURAL PANELS & DOORS INC

711 S. STIMSON AVE
 CITY OF INDUSTRY, CA 91745
 P: 714.671.9700 F: 714.671.9770

Authorized by: _____

Customer: _____

Via: _____

Collect

Prepaid and charge

Required: ___/___/___

Date: ___/___/___

Page: ___ of ___

Ship to: Same

Job site: _____

Your order #: _____

Quote: _____

Quantity _____	Species _____ Solid _____ Veneered _____	Jamb Thickness ① <input type="checkbox"/> 3/4" standard jamb <input type="checkbox"/> 1" jamb	Fire Rating _____ <input type="checkbox"/> Other: _____	JAMB TYPES																																																					
				① <input type="checkbox"/> FLAT JAMB (J _____) ② <input type="checkbox"/> APPLIED T-STOP (J _____) ③ <input type="checkbox"/> SINGLE RABBET (J _____) ④ <input type="checkbox"/> DOUBLE RABBET (J _____) ⑤ <input type="checkbox"/> SPLIT (J _____) ⑥ <input type="checkbox"/> SPECIAL JAMB (J _____) SEE DRAWING																																																					
		Note: _____ _____ _____																																																							
Hinges Type # _____ Thickness _____ Height _____ Backset _____		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">STRIKE</th> <th style="width: 30%;">LOCK</th> <th style="width: 30%;">DEAD LOCK</th> </tr> </thead> <tbody> <tr> <td>Manufacturer</td> <td></td> <td></td> </tr> <tr> <td>Template #</td> <td></td> <td></td> </tr> <tr> <td>ASA 1 1/4" x 4 7/8"</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>1 1/8" x 2 3/4"</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>1 1/8" x 3 1/2"</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other</td> <td></td> <td></td> </tr> <tr> <td>No lip</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <th>HARDWARE</th> <th>MODEL</th> <th>TEMPLATE #</th> </tr> <tr> <td>Panic bar strike</td> <td></td> <td></td> </tr> <tr> <td>Concealed overhead stop</td> <td></td> <td></td> </tr> <tr> <td>Door closer</td> <td></td> <td></td> </tr> <tr> <td>Electric strike</td> <td></td> <td></td> </tr> <tr> <td>Pivot</td> <td></td> <td></td> </tr> <tr> <td>Roller latch strike</td> <td></td> <td></td> </tr> <tr> <td>Electric power transfer</td> <td></td> <td></td> </tr> <tr> <td>Flush bolt strike</td> <td></td> <td></td> </tr> <tr> <td>Other</td> <td></td> <td></td> </tr> </tbody> </table>		STRIKE	LOCK	DEAD LOCK	Manufacturer			Template #			ASA 1 1/4" x 4 7/8"	<input type="checkbox"/>	<input type="checkbox"/>	1 1/8" x 2 3/4"	<input type="checkbox"/>	<input type="checkbox"/>	1 1/8" x 3 1/2"	<input type="checkbox"/>	<input type="checkbox"/>	Other			No lip	<input type="checkbox"/>	<input type="checkbox"/>	HARDWARE	MODEL	TEMPLATE #	Panic bar strike			Concealed overhead stop			Door closer			Electric strike			Pivot			Roller latch strike			Electric power transfer			Flush bolt strike			Other		
STRIKE	LOCK	DEAD LOCK																																																							
Manufacturer																																																									
Template #																																																									
ASA 1 1/4" x 4 7/8"	<input type="checkbox"/>	<input type="checkbox"/>																																																							
1 1/8" x 2 3/4"	<input type="checkbox"/>	<input type="checkbox"/>																																																							
1 1/8" x 3 1/2"	<input type="checkbox"/>	<input type="checkbox"/>																																																							
Other																																																									
No lip	<input type="checkbox"/>	<input type="checkbox"/>																																																							
HARDWARE	MODEL	TEMPLATE #																																																							
Panic bar strike																																																									
Concealed overhead stop																																																									
Door closer																																																									
Electric strike																																																									
Pivot																																																									
Roller latch strike																																																									
Electric power transfer																																																									
Flush bolt strike																																																									
Other																																																									
Corner <input type="checkbox"/> Square <input type="checkbox"/> 1/4" Radius <input type="checkbox"/> 5/8" Radius <input type="checkbox"/> Other _____		HANDING & DESIGNATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; text-align: center;"></td> <td style="width: 10%;">Qty _____</td> <td style="width: 60%;">Jamb Number _____</td> </tr> <tr> <td style="text-align: center;">Left hand LH</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;"></td> <td>Qty _____</td> <td>Jamb Number _____</td> </tr> <tr> <td style="text-align: center;">Right hand reverse RHR</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;"></td> <td>Qty _____</td> <td>Jamb Number _____</td> </tr> <tr> <td style="text-align: center;">Left hand reverse LHR</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;"></td> <td>Qty _____</td> <td>Jamb Number _____</td> </tr> <tr> <td style="text-align: center;">Right hand RH</td> <td></td> <td></td> </tr> </table>			Qty _____	Jamb Number _____	Left hand LH				Qty _____	Jamb Number _____	Right hand reverse RHR				Qty _____	Jamb Number _____	Left hand reverse LHR				Qty _____	Jamb Number _____	Right hand RH																																
	Qty _____	Jamb Number _____																																																							
Left hand LH																																																									
	Qty _____	Jamb Number _____																																																							
Right hand reverse RHR																																																									
	Qty _____	Jamb Number _____																																																							
Left hand reverse LHR																																																									
	Qty _____	Jamb Number _____																																																							
Right hand RH																																																									
Factory finishing <input type="checkbox"/> Standard stain <input type="checkbox"/> Custom stain <input type="checkbox"/> Clear varnish <input type="checkbox"/> Primed <input type="checkbox"/> Opaque paint																																																									