



1160 W. 16TH ST.
 INDIANAPOLIS, INDIANA 46202
 TOLL FREE: 877.257.1869
 VOICE: 317.257.1869
 FAX: 317.257.1973
 www.awningpartnerssigngroup.com

Date: _____
 Need Quote _____

INFORMATION WE WILL NEED TO GET YOUR AWNING QUOTE

Job Name: _____ Ship To City/State: _____

<u>Left Elev.</u>	<u>Front Elev.</u>	<u>Right Elev.</u>	<u>Back Elev.</u>	<u>SKETCH HERE</u>
Overall Awning Height: _____				
Height of sign Panel: _____				
Projection of each awning: _____				
Width of each awning (wall): _____				
Style: (Waterfall, Shed, etc.) _____				
End Style: Flat: _____ Round: _____ Open: _____				
Frame: Shadow Less: _____ Regular: _____				
Fabric Type: (Backlit, Vinyl, Sunbrella) _____				
Rigid Valance Height: _____				
Loose Valance Height: _____ Loose Scallop Style: _____				
(Please Circle)				
Trim/Binding on Sunbrella? _____ Color: _____				

Lights:	1 Row Doubles: _____	2 Row Doubles: _____	3 Row Doubles: _____
	1 Row Doubles: _____	2 Row Doubles: _____	3 Row Doubles: _____

Eggcrate:	Plastic: _____	Acrylic: _____	Aluminum: _____
-----------	----------------	----------------	-----------------

Graphics:	Yes _____ No _____	Digital Photo Available:	Yes _____ No _____
If so Type (eradicated, pressure sensitive, heat transfer, ..etc..) _____			
Letter Height:	_____	Drop Shadow or Outline:	_____
<u>Left Elev.</u>	<u>Front Elev.</u>	<u>Right Elev.</u>	<u>Back Elev.</u>
Copy: _____			
Vector Art Files Supplied:	Yes _____ No _____	Vector Art Files Accepted:	.EPS .CDR .AI version 9 and under

Backing (Over window of Above Roof Line)	Fabric: _____	Aluminum: _____
Powder Coated Frame:	Yes _____ No _____	Color: _____
Installation Required:	Yes _____ No _____	