

GLASS ORDER SHEET

SIDELIGHT WITH TWO BACKMITRES

1.34

Customer Name

Order Number

Date Ordered ____/____/____

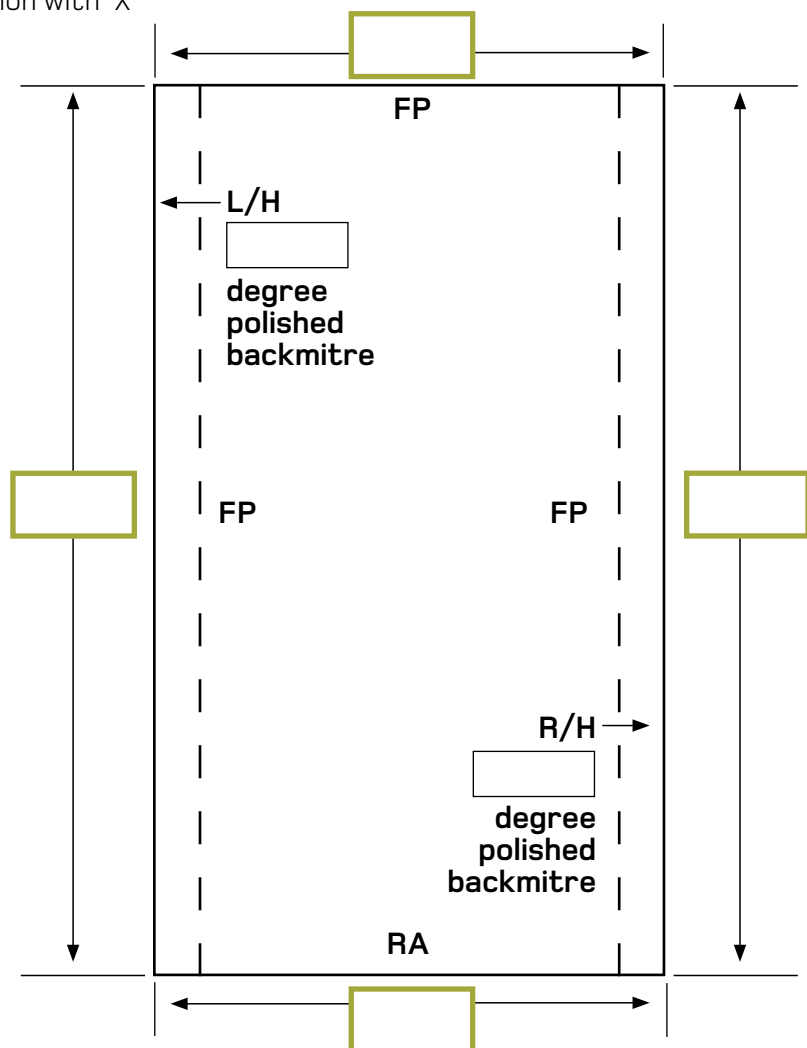
____mm Clear Toughened

Mark Toughened Glass Stamp position with 'X'

Note left hand and right hand

backmitre angles

Edges as marked 'FP'/'RA'

Please list special
instructions belowPlease fill in your
dimensions (mm)

Metro Performance Glass Office Use

Delivery Date

EDI No. _____ Diagram Reference No: 1.34

____/____/____