

OVER PANEL

2.46

2 x Top Patch

Customer Name

Order Number

Date Ordered ____ / ____ / ____

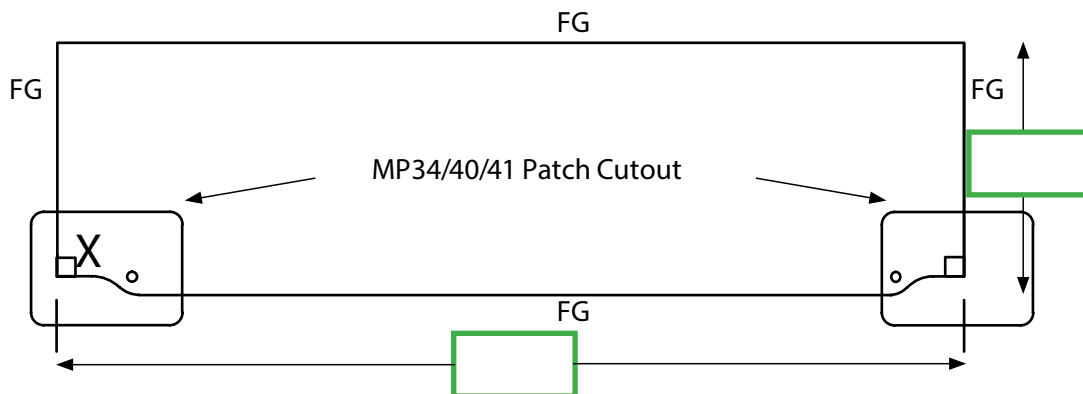
____ mm Glass Thickness

Stamp on bottom edge - marked 'X'

Flat polish 1 x Long Edge.

2 x MP34/40/41 cutout

Edges as marked 'FG'

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

Glass Finishing Key:

ARR: ARRISSED

FG: FLAT GRIND

FP: FLAT POLISHED

Metro Performance Glass Office Use

Delivery Date

EDI No. _____ Diagram Reference No: 2.46

____ / ____ / ____