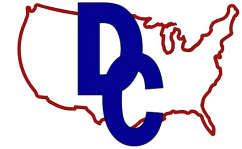


Hollow Metal Order Form

Company: _____ Door#/Location _____
 Shipping Address _____
 City: _____ State _____ Zip: _____
 Contact Name: _____
 Phone# _____ Email: _____
 Job Name: _____
 Door Location: _____
 Components Needed: Door Frame Hardware
 Door Material: Hollow Metal Other _____
 Fire Label: No Label 45 Minutes 60 Minutes 90 Minutes 3 Hours Other _____

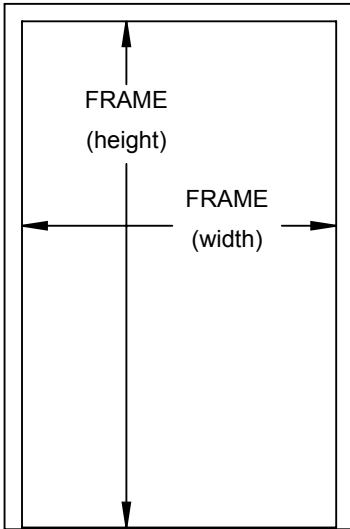


Door Controls USA, Inc.
 www.DoorControlsUSA.com
 1-800-437-3667

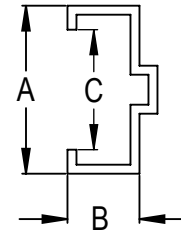
Section 1.

***** Record all measurement in inches *****

Section 2. (Skip this Section if Frame is not Required)



Actual Door Size:
 W _____ " X H _____ "
Actual Frame Size:
 W _____ " X H _____ "
Door Thickness:
 " _____ "



Frame Width:
 _____ " (A)
Frame Face:
 _____ " (B)
Throat Opening:
 _____ " (C)

FRAME PROFILE

Construction:
 Knock-Down
 Face Welded
 Continuously Welded

Wall Type:
 Drywall
 Masonry
 Concrete

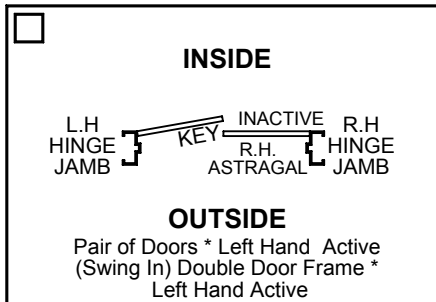
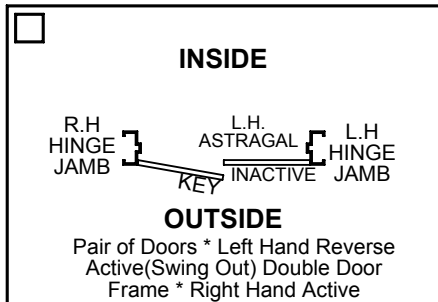
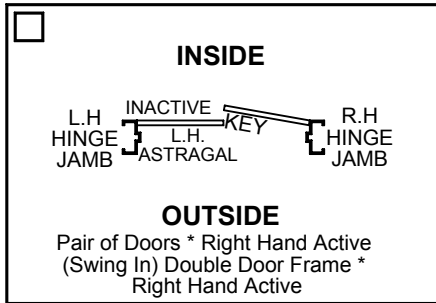
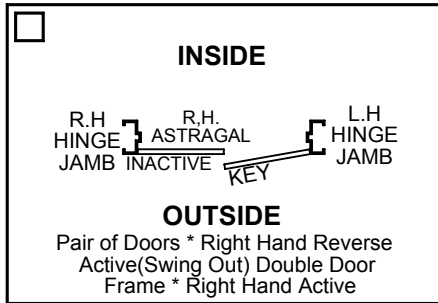
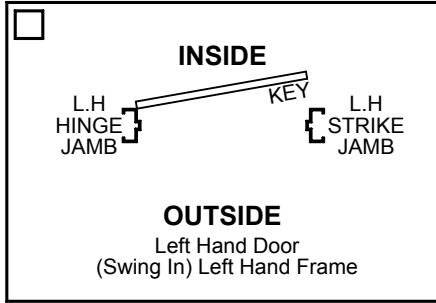
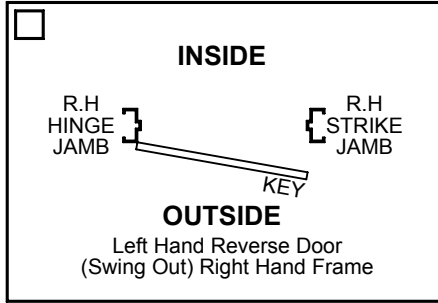
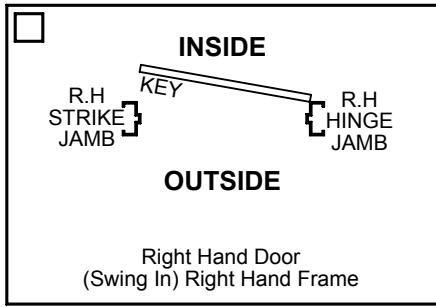
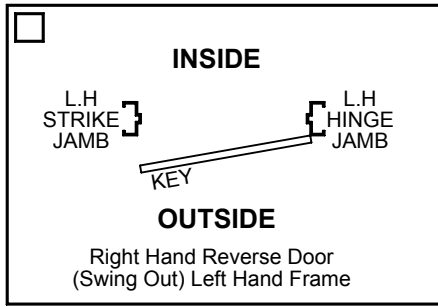
Delayed Egress: Yes No / If "Yes", hardware used: Maglock Delayed Egress Panic

Section 3.

NOTE: If single door move to next section

<p>(Top of Door) End View</p> <p>Top of Door to Top of Hinge</p> <p><input type="checkbox"/> Butt Hinge Hinge Size _____ " X _____ "</p> <p><input type="checkbox"/> Std. Weight <input type="checkbox"/> Heavy Weight</p> <p><input type="checkbox"/> Continuous Hinge <input type="checkbox"/> Full Surface <input type="checkbox"/> Concealed</p>	<p>(Top of Door) End View ACTIVE LEAF/ LOCK INFO</p> <p><input type="checkbox"/> Cylindrical Lock Bore: _____ " Backset: _____ "</p> <p><input type="checkbox"/> DeadBolt Bore: _____ " Backset: _____ "</p> <p><input type="checkbox"/> Mortise Lock <input type="checkbox"/> Exit Device</p>	<p>(Top of Door) End View INACTIVE LEAF</p> <p>Top Flushbolt: Dim A: _____ Height: _____ Width: _____ <input type="checkbox"/> Manual <input type="checkbox"/> Auto</p> <p>Deadbolt Strike: Dim B: _____ Height: _____ Width: _____</p> <p>Latch Strike: Dim C: _____ 4 7/8" ASA Strike</p> <p>Bottom Flushbolt: Dim D: _____ Height: _____ Width: _____ <input type="checkbox"/> Manual <input type="checkbox"/> Auto</p>
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Section 4. (Select Configuration and Handling)



Section 5. (If Applicable)

VISION LIGHT(S) EXPOSED GLASS

- 22 X 28 HALF GLASS
- 4 X 25 FULL GLASS
- 10 X 10
- OTHER _____
- LOUVER _____

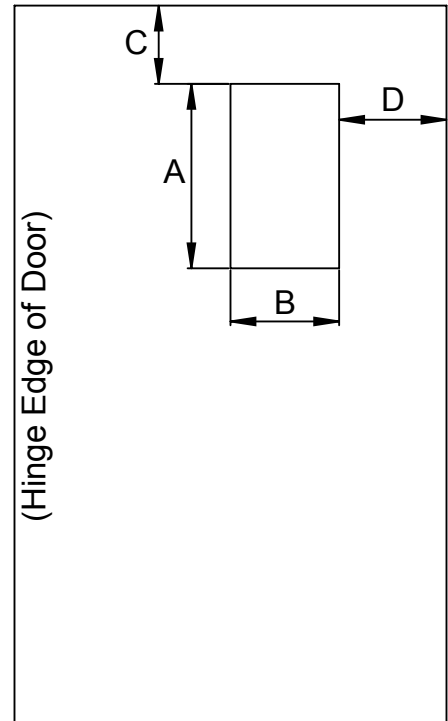
Glass Type:

- Wire Tempered Laminated

Cutout:

A _____ " B _____ "

C _____ " D _____ "



Indicate hardware to be reused or replaced, and list part # and quantity, if applicable

Section 6.

Replace	Reuse	Description	Part Number	Quantity
<input type="checkbox"/>	<input type="checkbox"/>	Astragal		
<input type="checkbox"/>	<input type="checkbox"/>	Closer		
<input type="checkbox"/>	<input type="checkbox"/>	Coordinator		
<input type="checkbox"/>	<input type="checkbox"/>	Drip Cap		
<input type="checkbox"/>	<input type="checkbox"/>	Flush Blot		
<input type="checkbox"/>	<input type="checkbox"/>	Hinge		
<input type="checkbox"/>	<input type="checkbox"/>	Kick Plate		
<input type="checkbox"/>	<input type="checkbox"/>	Lock Set		
<input type="checkbox"/>	<input type="checkbox"/>	Panic		
<input type="checkbox"/>	<input type="checkbox"/>	Sweep		
<input type="checkbox"/>	<input type="checkbox"/>	Threshold		
<input type="checkbox"/>	<input type="checkbox"/>	Weather Seal		
<input type="checkbox"/>	<input type="checkbox"/>	Other		

(Electrical Strike, Deadlock, Push/Pull)

Section 7. (Indicate any notes, sign and date)

Special Notes:

Approved by: _____ Date _____

Customer's Signature _____

DCU Rep _____

*** Hollow metal doors and frames will be made to order based on the information provided on order form. Doors and frames are non returnable unless Door Controls USA Manufacturer error. All shipments are shipped in a wooden crate via LTL carrier. Upon receiving the shipment check for any damage to crate, should there be any damaged please note the bill of lading and contact Door Controls USA immediately to start the claim process ***