

SEATING — Request Form



Due Date: _____

Project Name / Number: _____

Client Name: _____



CONFIGURATIONS (click **here** to see all)

(Please check one: Required to Specify and Quote)

- | | | |
|-----------------------------------|---------------------------------------|----------------------------------|
| <input type="checkbox"/> Single | <input type="checkbox"/> Straight | <input type="checkbox"/> Ellipse |
| <input type="checkbox"/> Double | <input type="checkbox"/> L-Shape | <input type="checkbox"/> Zig |
| <input type="checkbox"/> U-Shape | <input type="checkbox"/> Custom Curve | <input type="checkbox"/> Bench |
| <input type="checkbox"/> ¾ Circle | <input type="checkbox"/> Rotunda | <input type="checkbox"/> Ottoman |
| <input type="checkbox"/> Custom | | |

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DIMENSIONS

(Required to Specify and Quote)

Overall Length: _____

Seat Depth: _____

Overall Height: _____

Seat Pitch: _____

Overall Depth: _____

Apron Height: (if applicable) _____

Back Depth: _____

Base Height: _____

Overall Seat Height: _____

Base / Leg: _____

Overall Diameter (Rotunda/Ottoman Only): _____

Diameter (Ottoman Only): _____

STYLE GUIDE

(Required to Specify and Quote)

Inside Back: _____

Back Fabric: _____

End Panels: _____

Seat Fabric: _____

Seat Style: _____

Apron Material: _____

Seat Apron Style: _____

Base Material: _____

Base / Leg Style: _____

Outside Back Style: _____

REQUIRED PROJECT INFORMATION FOR QUOTE

(All Fields Below Must Be Filled)

Quote Due Date: _____

WCI To Purchase Fabric: YES NO

Requested Install Date: _____

WCI To Field Measure: YES NO

Design Firm & Location: _____

WCI To Quote Install: YES NO

Zip Code For Freight Cost: _____

Please email this seating specification form and floor plan to banquettes_quotes@westcoastindustries.com. Please note a floor plan is required for quoting.