

Company Name _____

OHARCO Account # _____

City _____

Ship Via: OHARCO Truck Will Call Other: _____

Today's Date: _____

Phone _____

Contact Name _____

E-mail _____

Date Needed _____



Phone: 800.228.9460 Fax: 888.808.5575
E-mail: oharcopanels@oharco.com

Panel Order: QUOTE Request Order

QTY	Width x Length	Core		Face			Back				✓ to stack face down	PRICING & Add'l Instructions
		Thickness	Type*	Manufacturer	Grade**	Color Name, # & Finish	Material ***	Manufacturer	Grade** <i>If using laminate</i>	Color Name, # & Finish <i>If using laminate</i>		

*** Core Type:**
P-Particle Board
M-MDF
N-NAUF/ULEF
S-Special—(Designate in additional instructions)

**** Grade:**
V-Vertical
PF-Postforming
S-Standard
W-Wood Veneer

*****Material:**
L-Laminate
H-Heavy Brown Backer
C-Cabinet Liner
(Specify Color—Almond, White or Black)

**** Grade:**
V-Vertical
PF-Postforming
S-Standard
W-Wood Veneer

Special/Shipping Instructions

PVC Edgebanding: QUOTE Request Order *Freight charges may apply

Edgebanding Brand Preference	Laminate Manufacturer (for best edgebanding match)	Laminate Name & Number (for best edgebanding match)	PVC Size Width x Thickness	# of rolls	Price*

Signature _____ Date _____ PO# _____ Job Name/# _____

Important Note: All orders are custom made to your specifications. Once approved, orders cannot be canceled, changed or returned for credit. _____ please initial

Pricing quoted good for 30 days unless otherwise noted.

\$5 surcharge for orders of less than 10 panels