T.M. COBB PREHUNG WORKSHEET

Please fax the complete as much information as possible, and fax to 714-957-6094

BUILDERS *Finish Supply*

(714) 540-7117
Fax 714-957-6094

Customer Name

Address

Contact Phone ( )

Job Name

Address

BFS Completes this information

Date

P.O. #

Placed By

WOOD HANDING ☐ — **LEFT** **RIGHT**

STEEL HANDING ☐ — **RIGHT** **LEFT**

OUR TRUCK	WILL CALL	INVENTORY CONTROL
JOB SITE	**COD**	QUOTE #
STANDARD ☐		CUSTOM ☐

BUILT UP ☐ **K.D.** ☐ **INTERIOR** ☐ **EXTERIOR** ☐

WRITTEN BY: _____

VENDOR	B/O SHIPPED	BACK ORD	SHIPPED	ORDERED	SINGLE - A PAIR -B SINGLE MULL -C DOUBLE MULL - D PAIR/W S/L-E	DESCRIPTION	SWEEP	MULL TYPE	FJ ☐ PRIMED ☐ FIR ☐ OAK ☐ WIDTH	T-AST	W/S	HAND	BORE BACKSET	DEADBOLT BORE SIZE & LOCATION	TYPE EXTERIOR TRIM	TYPE SILL	SWING IN / SWING OUT	PRICE QUOTED
						INTERIOR CASING TYPE (NOT APPLIED)								MITERED YES / NO		SOLID	FJ	

SPECIAL INSTRUCTIONS

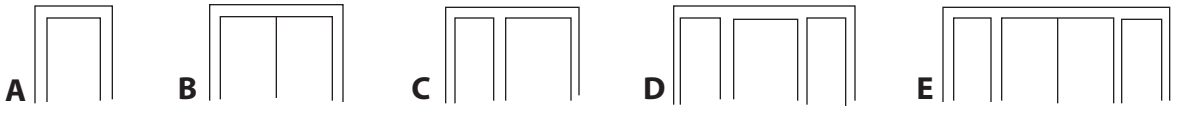
HINGES CUSTOMER TYPE **COBB** ☐

DELIVERY DATE TO THE CUSTOMER

PLEASE CHECK ALL DETAILS ABOVE TO ENSURE CORRECTNESS. UPON RECEIPT OF THIS SIGNED CONFIRMATION PRODUCTION WILL BEGIN. X_____ DATE _____

WORK ORDER

PICK A, B, C, OR E AND INDICATE X OR O
X- HANDED DOOR - ACTIVE
O - FIXED DOOR OR SIDELITE



AS VIEWED OUTSIDE LOOKING IN