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Date: _____ Job Name: _____
 Name: _____ Phone: _____
 Company: _____ Fax: _____
 Ship Address: _____ E-mail: _____
 City: _____ State: _____ Zip: _____

General Contractor / Deck Builder Metal Fabricator Home Owner Architect

*Please use box for basic layout drawing *Please list dimensions, outside to outside * Use dark ink or marker

TOP RAIL: <input type="checkbox"/> Series 200 (Flat) <input type="checkbox"/> Series 100 (Round) <input type="checkbox"/> Series 999 (Elliptical) <input type="checkbox"/> Series 375 (Square)	RAIL HEIGHT: <input type="checkbox"/> 36" (Residential) <input type="checkbox"/> 42" (Commercial) <input type="checkbox"/> Custom	POST ATTACHMENT: <input type="checkbox"/> Deck Mount (Surface) <input type="checkbox"/> Fascia Mount (Side)	FINISH OPTIONS: <input type="checkbox"/> White <input type="checkbox"/> Sand <input type="checkbox"/> Brown <input type="checkbox"/> Anodized <input type="checkbox"/> Black <input type="checkbox"/> Custom
RAIL INFILL: <input type="checkbox"/> 5/8" Square Picket <input type="checkbox"/> 1/4" Tempered Glass <input type="checkbox"/> 1/8" Stainless Cable	PICKET SIZE: <input type="checkbox"/> 5/8" x 5/8" <input type="checkbox"/> 5/8" x 1" <input type="checkbox"/> 5/8" x 1 1/2"	GLASS OPTIONS: <input type="checkbox"/> Bronze Glass <input type="checkbox"/> Clear Glass <input type="checkbox"/> Topless (Rail) Glass	CABLE OPTIONS: Diameter: _____ Fitting #1: _____ Fitting #2: _____ <input type="checkbox"/> Intermediate Picket