

# SUPPLY ONLY ORDER FORM



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Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Your Order No: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_

Date Required: \_\_\_\_\_ Time Required: \_\_\_\_\_

Delivery Address (if different to the invoicing address)\*

On-site contact name: \_\_\_\_\_ On-site contact phone no: \_\_\_\_\_

## Product Order

Floorcovering Type	Colour	Length	Width	Unit Price (m <sup>2</sup> )	Total Price

\*Delivery address must include full postcode

Carriage	
Total	
VAT @ 17.5%	
<u>Total Payable</u>	