



Measure Deliver & Install or Service Call Form

Date _____

Fax completed form to: **973-209-7621**

Email completed form to: **MDI@Easco-Shower.com**

Dealer *

Branch *

Salesperson *

Phone *

Fax *

Email *

* Denotes required field

Finish	Product Line	Glass Type	
Polished Chrome	Image - 1/4" Slider	Clear ^{1,2,3}	Obscure ¹
Polished Brass	Image Plus - 3/8" Slider	Rain ^{1,2}	Bronze ^{1,2,3}
Brushed Nickel	Expressions	Nature ^{1,2}	Gray ^{1,2,3}
Polished Nickel	Elite Pivot	Satin Mist ^{1,2,3}	ShowerGuard ^{1,2,3}
White	Estate	Low Iron ^{1,2,3}	Low Iron
ORB	Everest	Thickness Availability 1/4" (1) 3/8" (2) 1/2" (3)	ShowerGuard ^{2,3}
Matte Black	Simplicity		
Custom Plating	Synchronus		

Quote Attached?

Yes No

EnduroShield

Yes No

Steam

Venting

Transom

Wet Glaze

Corner

Glass

Clamps

Model No. _____

Hinge Side: Left Right

Width _____ Height _____

Shower Head: Left Right

Options: Handle/Towel Bar No. _____

Etched Glass Design No. _____

* NJ ST-8 or NY ST-124 TAX EXEMPT FORMS MUST BE SENT WITH THIS FORM IF APPLICABLE *

MDI Information - Required for EASCO Factory Installation or Service

Homeowner *

Phone *

Street *

City *

State *

Zip *

County

Cell Ph. No. _____

Email address: _____

EASCO can send email receipts when required. (Use separate form for additional contacts)

Contractor _____

Cell Phone _____

Labor Paid By: *

Homeowner COD

Contractor COD

Dealer on Account

Type of Service: *

Complete MDI

Measure Only

Install Only

Service Call Required? Yes

Comments

* Denotes required field

Important Note: If EASCO is not providing MDI, finished wall measurements are required including any out-of-square conditions. A \$80 (plus tax) measure fee is due at time of measure. Installation fees are due prior to start of any work. Return trips due to dealer/homeowner error will be billed at half the original installation charge or \$95 per hour including travel.