

Request for Quote

Date:	Rep Code:
Due Date:	Specifier:
Project Name:	Drawing Format:
HBF Sales Rep:	Project Size:
Dealer:	Quantity:
HBF CSR:	Ship to State/ZIP:

Contract Type: Product Type:

Model Number:	QTY:	Model Number:	QTY:
Model Number:	QTY:	Model Number:	QTY:
Model Number:	QTY:	Model Number:	QTY:
Model Number:	QTY:	Model Number:	QTY:
Model Number:	QTY:	Model Number:	QTY:

Description:

COM/COL:

COM/COL Supplier:

COM/COL Pattern or Color:

Graded Fabric or Leather:

Outer Upholstery:

Cushion Upholstery:

Special Compliance:

Base Finish:

Flammability:

Power:

Leg Kit:

Attachment:

Please refer to price lists published on **HBF.com** for product specifics. Please add attachement to email along with this form. For Modular orders a layout is required.

Please attach or add to page 2.

*** Please note: Immediately after completion of form please: 1. Select Printer Option 2. Save as Adobe PDF (on your desktop or elsewhere) 3. Retrieve PDF saved version 4. Email directly to Design Services at HBFDS@hbf.com

For Internal Use Only

Date Request Received: Date Quote Completed: Completed By:



Request for Quote Additional Information

For Internal Use Only Date Request Received: Date Quote Completed: Completed By: