

POLHAVN WOODFABRIK WORK ORDER

DATE: _____

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CLIENT INFORMATION:

NAME: _____

ADDRESS: _____

TEL.: _____ **E-MAIL:** _____

ITEM:

REVIEW DATE: _____ **DELIVERY DATE:** _____

MATERIALS:

WOOD-

SIZE-

QUANTITY-

LAYUP-

OTHER-

COST:

DESIGN CREATION:

COST:

WORK/DESIGN:

BORDER-

CENTERING-

SPACING-

STYLE-

DEPTH-

SURFACE TEXTURE-

BACKGROUND TEXTURE-

COMMENTS:

COST:

FINISH:

PAINT-

FINISH TYPE-

WAX-

COST:

SHIPPING/DELIVERY:

COST:

TOTAL COST: