

**DOUBLE REBATE DOOR JAMB ENQUIRY FORM**

**Please complete this form, so we can complete your enquiry.**

Please provide the measurements, in millimetres,  
where indicated in the diagram below

DATE: \_\_\_\_\_

CLIENT NAME/NUMBER: \_\_\_\_\_

DELIVERY ADDRESS: \_\_\_\_\_

**MATERIAL:**

☐ FINGER JOINTED PINE RAW

☐ FINGER JOINTED PINE PRIMED

