



MOLDED SHOWER TRIM

Voice: 1-800-ONYX-TOP (1-800-669-9867)

ORDER FORM
















Your Company: _____

Emails orders to: orders@onyxcollection.com

Email quotes to: quotes@onyxcollection.com

Your Name: _____ Your Phone # _____ P.O.# _____

Date Ordered: ____/____/____ Install Date: ____/____/____ Customer Name: _____

 90° INSIDE Corner TRIM <input type="text" value="COLOR"/> <input type="checkbox"/> Gloss Finish <input type="checkbox"/> Stone Tile Finish <input checked="" type="checkbox"/> 1 Finished End Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Total Inches " Length of each: " " " " " "		 135° INSIDE Corner TRIM <input type="text" value="COLOR"/> <input type="checkbox"/> Gloss Finish <input type="checkbox"/> Stone Tile Finish <input checked="" type="checkbox"/> 1 Finished End Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Total Inches " Length of each: " " " " " "	
 3-Way Joint BLOCK For joining Inside Corner Trim without mitering Total # of Pieces <input type="text" value=""/> <input type="text" value="COLOR"/> \$ <input type="text" value=""/>			
 90° OUTSIDE Corner TRIM <input type="text" value="COLOR"/> <input checked="" type="checkbox"/> 1 Finished End Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Total Inches " Length of each: " " " " " "		 135° OUTSIDE Corner TRIM <input type="text" value="COLOR"/> <input checked="" type="checkbox"/> 1 Finished End Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Total Inches " Length of each: " " " " " "	
 Edge Cap TRIM <input type="checkbox"/> 1/4" <input type="checkbox"/> 3/8" <input type="checkbox"/> 5/8" <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Length of each: Finished on: <input type="checkbox"/> Left <input type="checkbox"/> Right Finished on: <input type="checkbox"/> Left <input type="checkbox"/> Right Finished on: <input type="checkbox"/> Left <input type="checkbox"/> Right Finished on: <input type="checkbox"/> Left <input type="checkbox"/> Right Finished on: <input type="checkbox"/> Left <input type="checkbox"/> Right Total Inches "			
 COVED Straight TRIM <input checked="" type="checkbox"/> 1 Finished End <input type="checkbox"/> Gloss Finish <input type="checkbox"/> Stone Tile Finish <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Total Inches " Length of each: " " " " " "			
 CROWN MOLDING <input type="checkbox"/> Liberty <input type="checkbox"/> 3" Tall <input type="checkbox"/> 2" Tall <input type="checkbox"/> Classic <input type="checkbox"/> 3" Tall <input type="checkbox"/> 2" Tall <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Select Style <input type="checkbox"/> Top Mount No Notch <input type="checkbox"/> Cap Mount Notched Bottom Piece #1 " Finished End Left <input type="checkbox"/> Right <input type="checkbox"/> None <input type="checkbox"/> Piece #2 " Finished End Left <input type="checkbox"/> Right <input type="checkbox"/> None <input type="checkbox"/> Piece #3 " Finished End Left <input type="checkbox"/> Right <input type="checkbox"/> None <input type="checkbox"/>		CORNER BLOCKS QTY: <input type="text" value=""/> 2"  QTY: <input type="text" value=""/> 3" 	
 CHAIR RAIL TRIM - 2 1/2" Tall <input checked="" type="checkbox"/> 1 Finished End <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Finished on: <input type="checkbox"/> Left end <input type="checkbox"/> Right end Finished end is: <input type="checkbox"/> Flat <input type="checkbox"/> Tapered Piece #2 " Finished on: <input type="checkbox"/> Left end <input type="checkbox"/> Right end Finished end is: <input type="checkbox"/> Flat <input type="checkbox"/> Tapered Piece #3 " Finished on: <input type="checkbox"/> Left end <input type="checkbox"/> Right end Finished end is: <input type="checkbox"/> Flat <input type="checkbox"/> Tapered Piece #4 " Finished on: <input type="checkbox"/> Left end <input type="checkbox"/> Right end Finished end is: <input type="checkbox"/> Flat <input type="checkbox"/> Tapered Total Inches "			
 CASING Finished Ends <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Both <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Length of each: " " " " " "			
 BASE BOARD Finished Ends <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Both <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Piece #2 " Piece #3 " Piece #4 " Piece #5 " Total Inches " Length of each: " " " " " "			
 BASE SHOE Finished Ends <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Both <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Piece #2 " Length of each: " " " "		 BULL NOSE TRIM <input type="text" value="COLOR"/> \$ <input type="text" value=""/> Piece #1 " Piece #2 " Length of each: " " " <input type="checkbox"/> Finished on both ends	
<input type="checkbox"/> Color Matched 100% SILICONE <input type="checkbox"/> 10.3 oz.		\$ <input type="text" value=""/>	
<input type="checkbox"/> Clear Adhesive 100% SILICONE 10.3 oz. (Average: 6-12 tubes per shower [1 tube /1150 square inches of panels & trim])		\$ <input type="text" value=""/>	
TOTAL for TRIM:		\$ <input type="text" value=""/>	