



Property Armor 2910-4 West Beaver Street Jacksonville, FL 32254 P 904-356-0092 F 904-356-0093

Date _____ Purchase Order _____ Email _____

Customer _____

Address _____ City _____ State _____ Zip _____

Phone _____ Cell Phone _____ Fax _____

Unit Make _____ Unit Model _____ (If Known)

Unit Dimensions W- _____

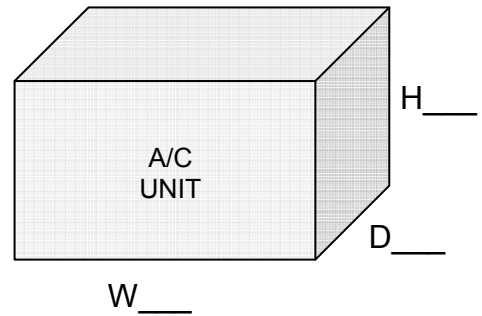
D- _____

H- _____

Curb Dimensions W- _____

D- _____

H- _____



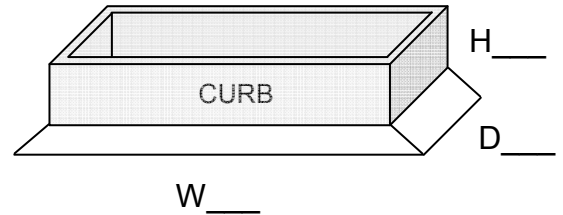
Roof Material

Concrete- _____

Asphalt- _____

Metal- _____

Wood- _____



Curb Position

Level- _____ Un-Level- _____ Pitch _____

Model of Interest

S1 _____ S2 _____ S3 _____ S4 _____ Other _____

Model Application Mount to Roof _____ Mount in Curb _____

Size W- _____ D- _____ H- _____

Color Option _____ (additional charge and lead times apply for colors other than black)

Installation Kit Needed Y N Type _____

Delivery Service Requested Y N (additional charge) Delivery Date ____ / ____ / ____

Local Installation Needed Y N (additional charge) Date ____ / ____ / ____

Cage(s) Ordered Qty _____ Model _____ Size _____

www.PropertyArmor.net