	MOTORIZED BTX 5060 DRAPERY ROD												*Required	Automated		
DATE:								K:			nequireu	Motorized				
	*	*Company:									Shades					
	4	Address:														
		City:			Location:											
	Ë S							Address:					Page of			
	BILL TO:	*Name:						City:						, <u> </u>		
		*Contact Phone:						State: Zip:							Please send completed form to	
	*	*Fax #:						Contact Ph	one #:						orders@amsshades.com	
	*	'Email:								or fax to 954-974-0529						
A: SELECT MOTOR B: SELECT CONTROL TYPE C: SELECT PLEAT TY 30 Watt RTS Pinch Pleat 45 Watt Z-Wave RippleFold 80 30 Watt Tandem DCT RippleFold 10 45 Watt Tandem S-485 RippleFold 12 Sigbee RTS Wireless Interface Single Wa					at d 80% d 100% d 120%				sters (enter Quantity)				Enter Ad	ditional Controls Here:		
г.	CHECK	MOUNTING DR	ACKETS (SPECIFT QUA		ng 🗆 Single	Wall			μų:							
	QTY					MOTOR (Left or)		DRAW ft, center, off center or right)	center, off center		R BENDS mplate)	PROGRAM ROD (Yes or No)		ECIAL REMA	RKS & PROGRAMMING DIRECTIONS	
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Note: Custom made products may not be returned or cancelled.

Acceptance of Proposal: The above prices, specifications and conditions are satisfactory and are hereby accepted. Automated Motorized Shades is authorized to perform the work as specified. Payment will be made as stated above. In the event of any litigation to enforce or interpret any terms of this Agreement, the parties agree that such action will be brought in the Superior Court of the County of Broward, Florida. In no event shall the litigation of any controversy or the settlement thereof delay the performance of this Agreement. If an action is commenced to enforce payment as provided herein, Customer agrees to pay Automated Motorized Shades's Attorneys' fees, court costs and other costs of collection. I have read and agree to the terms stated.

I certify that I am responsible for the measurements, specifications and their accuracy. I understand any corrections or revisions requested may result in additional fees. Title: Date:

*Responsible Party Signature:_____

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3117 NW 25th Avenue Pompano Beach, FL 33069 • 954-974-0525 • Fax: 954-974-0529

www.automatedmotorizedshades.com

MOTORIZED SOMEY CIVIDEA DRAPERY ROD

DATE: SIDE MARK:												*Required	Automated Motorized Shades							
BILL TO:	*Co	*Company:						D #:										Shades		
		Address:						Location:												
	Cit	City:						-	Address:							_				
	Sta	State: Zip:																Page of		
	*Name:						Ξŀ	City: State: Zip:						_	_					
	*Co	*Contact Phone:												_	(P	lease send completed form to				
	*Fa	*Fax #:						Contact Phone #:									orders@amsshades.com			
1	*Er	mail:	ail:										or fax to 954-974-0529							
A: SELECT MOTOR 35 Glydea 60 Glydea			B: SELECT CONTROL TYPE RTS C-Wave DCT 4 wire (60 only) RS-485 Zigbee RTS Wireless Interface			C: SELECT PLEAT	80% 100% 120%		D: SELECT OVERLAP MASTERS E: SELECT REMOTE RippleFold Butt Masters runer Quantity) Type Color Qty 1 channel white black silver 4 channel white black silver 16 channel white silver			Qty	Enter Ado	ditional Controls Here:						
F: CH	ECK MO	OUNTING B	RACKE	TS (SPECIFY QUAI	NTITY) 🗆 Ceil	ing 🛛 Single	e Wall 🛛	Doub	ole Wall C	Qty:										
	QTY	ROON	١	WIDTH	HEIGHT	MOUNT (Inside or Outside)	MOTOR SID (Left or Right)	E (le	DRAW eft, center, off center or right)	SPLICE (Yes or No)	CURVE OR (Provide Ten			DS PROGRAM ROD (Yes or No) S		SP	SPECIAL REMARKS & PROGRAMMING DIRECTIONS			
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Note: Custom made products may not be returned or cancelled.

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*Responsible Party Signature:_____

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