CRL ARS ALUMINUM RAILING SYSTEMS



ARS Quote/Order Request Form		Date
lame	Company	

 Name_______
 Company _______

 Email _______
 Account Number ______

 Phone Number _______
 Job Name _______

Utilize this form to assist you in covering the details required to quote an ARS Aluminum Railing System. Going through this exercise should prevent you from overlooking any details related to your installation.

IMPORTANT: Depending on the complexity of your project, one or more of the following may be required to accurately order: sketches or drawings of your particular application with dimensions; printed architectural drawings or CAD files; photos of job site conditions (digital images are preferable).

 $\begin{tabular}{ll} \textbf{NOTE:} Please download and submit completed form to railings.archmetals@crlaurence.com A final sign off is required prior to any custom fabrication. \end{tabular}$

QUANTITY

Posts Needed _____

TOP RAIL

Series 100 Series 150 Series 200 Series 200X Series 300 Series 300X Series 320X Series 350X Series 400

RAIL HEIGHT (AT TOP)

36" (914 mm) 42" (1067 mm) 48" (1219 mm) Other (Specify)

POST SIZE

1-1/8" x 2-3/8" (28.6 x 60.3 mm) 2-3/8" x 2-3/8" (60.3 x 60.3 mm) 4" x 4" (101.6 x 101.6 mm)

Series 500X DECK RAIL INFILL

Glass (Thickness) _____ Picket Round Stainless Steel Cable Other (Specify) ____

STAIR RAIL INFILL

Glass (Thickness)
Picket Round
Stainless Steel Cable
Other (Specify)
(Glass not supplied by CRL)

POST ATTACHMENT

Surface Mount (Top of Deck Surface)
Core Mount
Fascia Mount
Other (Specify)

SUBSTRATE

Wood
Concrete
Steel
Other (Specify)

FLOOR CONDITION

Flat
Sloped (Degrees)

COLOR

LAYOUT GRID TO SKETCH DESIGN



NOTES

Please submit to: railings.archmetals@crlaurence.com