



Shower Door Installation Order Form

4575 boul. Poirier, Montreal, QC, Canada H4R 2A4
Tel: 514-326-2222 • Toll Free: 800-993-0033 • Fax: 514-326-2008

Retailer Information

Retailer Name _____

Salesperson _____

Email _____ Phone Number _____

Purchase Order _____ Sales Order _____

Please confirm the installation date by email so that I can prepare the payment balance Yes No

Customer Information

Customer Name _____

Address _____

City _____ Province _____ Postal Code _____

Phone Number _____ Email _____

Product Information

Model # _____

Product Name _____

Product Type Shower Door Tub Door

Bypass Sliding Pivot Walk-in Corner

Delivery of the shower door unit to client by: Installer* Retailer

***Please note: For installations not done within 60 days from the order date, product(s) will be returned to the retailer. After this delay, Fleurco will not follow up. Client has to contact retailer to arrange delivery and installation.**

Customer Authorization

Name _____ Date _____ Signature _____

Installation Authorization; Full Payment Confirmation

Return signed order form when full payment is confirmed.

Date _____ Salesperson Signature _____

Send the completed Installation Order Form with the order to Fleurco by:

Email: install@fleurco.com • Fax: 514-326-2008