



Robaduct LLC
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FABRICATION ORDER

Please fax/email the following information and will promptly provide a price.

Company Name: _____	Contact: _____	Email Address: _____
Address: _____	City/State/Zip: _____	Phone: _____
P.O #: _____	Order Date: _____	Required Date: _____

#	DUCT SIZE	QUANTITY	TYPE	APPLICATION	CONNECTION TYPE	NOTES
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Special Remarks:

Customer Signature verifying correctness in sizes: _____ Date: _____