



Please complete this form and customer service will provide you with a quote within 48 hours. Upon approval, please sign the form below and provide your credit card information. Thank you!

Bi-Fold /Quote Order Form

Mirror sizes vary, so each mirror **MUST** be measured separately and put on a separate order form.

FRAME STYLE _____

FRAME COLOR _____

Room Name or Quantity

Step 1: MIRROR MEASUREMENTS

MIRROR #1 - **WIDTH**

HEIGHT

MIRROR #2 - **WIDTH**

HEIGHT

Step 2: MIRROR PLACEMENT

Measure the distance from each edge of the mirror to the nearest wall, outlet, backsplash, etc.

Enter: 0, 1/8, 1/4, 3/8, 1/2, 5/8, or >5/8.

In between? Choose the larger number.

More than 1 inch? Enter 1"

TOP

LEFT

RIGHT

BOTTOM

BILLING INFORMATION

Name _____

Address _____

City _____ State _____ ZIP _____

Phone (____) _____ Fax (____) _____

E-mail _____

SHIPPING ADDRESS SAME AS ABOVE

Name _____

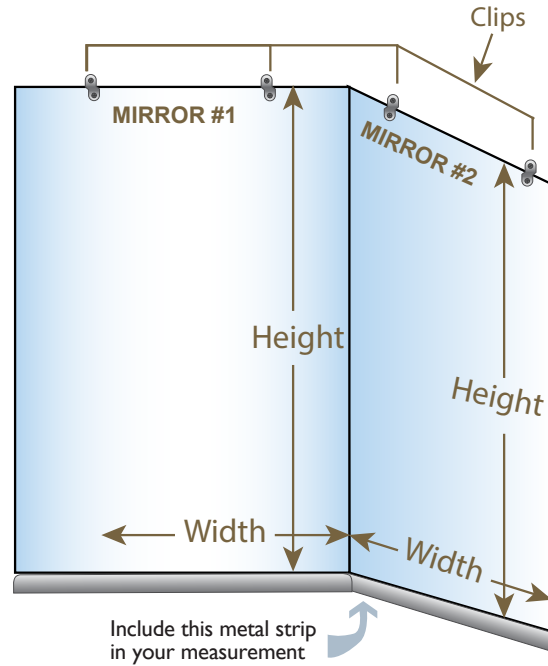
Address _____

City _____ State _____ ZIP _____

Phone (____) _____ Fax (____) _____

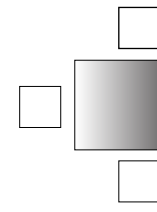
E-mail _____

**You have 24 hours to cancel or change your order.
Call toll-free: 866.304.6283**

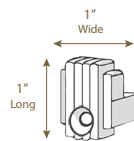


Step 3: MIRROR ATTACHMENT

**CHECK SIDES
MIRROR HAS
CLIPS OR A
METAL STRIP**



None



Yes

Do your clips look like this? They may not work with the frame. We will send you 12 replacement clips FREE.

To be completed by MirrorMate Customer Service

Frame Cost

Shipping Cost

Sales Tax on Merchandise Only (NC only)

TOTAL

To be completed upon approval of quote (Required)

Customer Signature: _____

Check Enclosed

Credit Card (circle one)

Master Card Visa Discover AmEx

Security Code/CSV

Expiration Date ____/____

ORDER VIA

Mail: 9317 Monroe Road, Suite A, Charlotte, NC 28270

www.mirrormate.com Phone: 866.304.6283 Fax: 704.708.5365