



p. 1.800.593.3411
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BERLIN GARDENS
take life outdoors

2018 Gazebo Order Form

Page _____ of _____
Date _____
P.O. # _____

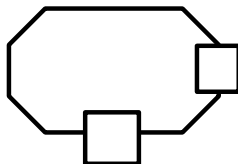
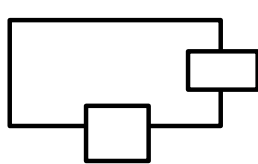
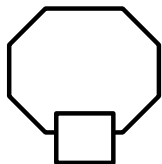
Dealer's Name & Address

*Dealer Name:
*Address:
*City, State, Zip:
Phone:

Ship to Name & Address

*Name:
*Address:
*City, State, Zip:
*Phone:

*SHIP VIA	<input type="checkbox"/> LTL	<input type="checkbox"/> BG Delivery	<input type="checkbox"/> CPU	Date of Pick-up _____	
Gazebo Style & Size	<input type="checkbox"/> Octagon	<input type="checkbox"/> Rectangle	<input type="checkbox"/> Oblong	<input type="checkbox"/> Square	\$ _____
Material	<input type="checkbox"/> Treated Wood	<input type="checkbox"/> White Vinyl	<input type="checkbox"/> Clay Vinyl		\$ _____
Construction	<input type="checkbox"/> Built on Site	<input type="checkbox"/> Kit	<input type="checkbox"/> Pre-Built		\$ _____
Color	<input type="checkbox"/> U.V. Clear Watersealer	<input type="checkbox"/> Stain			\$ _____
	<input type="checkbox"/> Natural Unstained	<input type="checkbox"/> Paint			\$ _____
Roof Style	<input type="checkbox"/> Regular Roof	<input type="checkbox"/> Classic Roof			\$ _____
Roofing Material	<input type="checkbox"/> Metal Roofing (color)	<input type="checkbox"/> Asphalt Shingles (type)	<input type="checkbox"/> Shingles to Match		\$ _____
Screens	<input type="checkbox"/> Full Set with one door	<input type="checkbox"/> One Extra Door	Direction of swing(left is standard)	<input type="checkbox"/> Left <input type="checkbox"/> Right	\$ _____
<small>*Note Door Placement and direction of swing on Diagram below</small>	<input type="checkbox"/> No Screens				
Benches	<input type="checkbox"/> Full Bench Set	<input type="checkbox"/> Partial Bench Set	Sections _____		\$ _____
<small>*Note Bench Placement on Diagram below</small>					
Rail Style	<input type="checkbox"/> American	<input type="checkbox"/> Colonial (vinyl only)			\$ _____
	<input type="checkbox"/> Deckorators Classic	<input type="checkbox"/> Deluxe Colonial (wood only)			\$ _____
Floor	<input type="checkbox"/> Treated Wood	<input type="checkbox"/> Brookstone	<input type="checkbox"/> Iron Wood		\$ _____
	<input type="checkbox"/> Ipe	<input type="checkbox"/> Walnut	<input type="checkbox"/> Cobblestone		\$ _____
	<input type="checkbox"/> Mahogany	<input type="checkbox"/> No Floor			\$ _____
Site Type	<input type="checkbox"/> Gravel Pad	<input type="checkbox"/> Concrete Pad	<input type="checkbox"/> Wood Deck		\$ _____
	<input type="checkbox"/> Platform	If yes, approx. how high? _____			\$ _____



Freight _____
Total _____

Comments:

Ordered By:
