



Direction Selection Sheet

High Security Gate

TO:

Fax:

Approved as marked on drawings below:

For Model:

Client Name

Client Signature

Date:

If ordering multiple units: please copy this sheet for each different configuration requested - -
Note quantity please.

Thanks again for your order.

To build your unit (s) correctly, we need to verify some information that is crucial to making sure they operate as desired.

Please be sure to circle on the appropriate layout, which direction you want your door to swing open.

Upon completion, fax this completed form back to us at the fax number below.

We cannot fabricate your order on a verbal confirmation, or until we receive this direction sheet back with your approval. Thanks again for your business.

