

Letter of Intent

Company

Company Name

Contact Name

Address

City

State

ZIP Code

Phone Number

E-mail Address

Project

Project Name

Skyline Design Quote Number

Project Award Date

Estimated Order Date

Estimated Install Date

Number of Samples Required

Size of Samples Required (4"x4" standard / 4"x8" custom)

Notes

Letter of Intent to Purchase

_____ has been awarded this project and we intend to purchase this product (pending architect/designer approvals) from Skyline Design per the terms outlined in the above-referenced quote(s).

We will do our best to accommodate your sample request as quickly as possible. Due to application procedures, some samples may only be available in certain sizes and configurations. If more information is required, a Skyline sales support person will contact you directly. Please reach out to your Skyline sales support representative with any questions.

Listed above are samples required for submittal. If additional samples are required, you may attach a separate page, as necessary.

Please include the following information:

- 1. Quantity and size of samples
- 2. Application
- 3. Glass thickness
- 4. Glass type
- 5. Pattern layout, scale, and color information

Signature

@Skyline / skyline.glass

Skyline Design, Inc. 1240 N Homan Ave, Chicago, IL 60651

Date