

Order Form: 001DKOF

Company:			Todays Date:			
Project Name:			Purchase Order #:			
<u>Door Information</u>						
For Door(s):					Single Pair Dou	ıble Egress
Check For Fire Rated				Access (Control By Others?	☐ Yes ☐ No
Electrified Hardware – Being Supplied By Hardware Distributor						
	QTY	Part #				Manufacturer
Power Door Operator: Electric Lock (or Strike):						
Push Button(s):						
Key Switch(s):						
Request To Exit Device:						
Door Position Switch(s):						
Power Supply:						
Timer:						
Relay:						
Other:						
Other:						
Other:						
Reader/Keypad (if by						
Hardware Supplier):						
<u>Description Of Operation</u>						
Normal (Locked or Unlocked?) Condition Of Door:			Locked	Unlocked	or ☐ Scheduled (i.e.	.; Day/Night)
Access From Exterior Side By:						
Exit From Interior Side By:						
Special Conditions, Night vs Day etc.:						
On Loss Of Main Power (Locked or Unlocked?):			Locked	Unlocked		
During Active Fire Alarm (Locked or Unlocked?):			Locked	Unlocked		
Any Other Special Conditions						