



ONCE COMPLETED FAX TO 1 416 245-8502

PROJECT INFORMATION	
PROJECT NAME:	GROUP I.D.
PROJECT ADDRESS:	
PROJECT CITY:	
PROJECT REFERENCE #	
COMPANY NAME:	
COMPANY ADDRESS:	
CITY:	
CONTACT NAME:	
CONTACT PHONE:	
CONTACT FAX:	

Hall Stations Information							
Hall Station Type:	Flush Mount	<input type="checkbox"/>	Gilda Surface Mount	<input type="checkbox"/>	Surface Mount	<input type="checkbox"/>	
#4 Stainless	<input type="checkbox"/>	#8 Stainless	<input type="checkbox"/>	#4 Brass	<input type="checkbox"/>	#8 Brass	<input type="checkbox"/>
Existing Plate Size:		Width		Height		Hole C/L	

MAD STANDARD PUSHBUTTON :								
MAD BP	Classic <input type="checkbox"/>	Disc <input type="checkbox"/>	Moon <input type="checkbox"/>	California <input type="checkbox"/>	Colour	Blue <input type="checkbox"/>	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
MAD BS	Classic <input type="checkbox"/>	Disc <input type="checkbox"/>	Moon <input type="checkbox"/>	California <input type="checkbox"/>	Colour	Blue <input type="checkbox"/>	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
MAD BL	"B" <input type="checkbox"/>	"F" <input type="checkbox"/>	"K" <input type="checkbox"/>	"Q" <input type="checkbox"/>	Colour	Blue <input type="checkbox"/>	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
MAD DUAL ILLUMINATION PUSHBUTTON:								
MAD BD	"B" <input type="checkbox"/>	"F" <input type="checkbox"/>	"K" <input type="checkbox"/>	Colour	Blue/Amber <input type="checkbox"/>	Amber/Blue <input type="checkbox"/>	Red/Blue <input type="checkbox"/>	

BUTTON VOLTAGE INFORMATION :			
VOLTAGE:		AC / DC	<input type="checkbox"/>
		+/- Common	<input type="checkbox"/>
		Touch Buttons	<input type="checkbox"/>

FIRE SERVICE / EMERGENCY RECALL:				
Code Standard	B44/ANSI-98 or earlier	<input type="checkbox"/>	B44/ANSI-00	<input type="checkbox"/>
			B44/ANSI-04	<input type="checkbox"/>
Fire Service Key Codes:	MAD 4003	<input type="checkbox"/>	OTIS UTF	<input type="checkbox"/>
NATIONAL H-341/ILLINOIS	CA (PRE99) MFD-1/ACE	<input type="checkbox"/>	CT BFD-1 / ACE	<input type="checkbox"/>
MA 3502 / YALE	RI WD01 / ILLINOIS	<input type="checkbox"/>	CA (PRE99) H-341/ILLINOIS	<input type="checkbox"/>
CHIG 5957 / YALE	NYC 2642 / YALE	<input type="checkbox"/>	NYC 2642 /ILLINOIS	<input type="checkbox"/>
Other-Please Specify				

