PANEL COM REQUEST FOR APPLICATION TEST

SEND COMPLETED FORM AND FABRIC TO:

Compile Customer Service 565 Petrolia Road, Doors 6-13 Toronto, Ontario M3J2X8 Phone: 416.739.5000 Attn: Eric Sam

Requested By:'		
Phone #:		Fax #:
Project Name		Dealer/Specifier
Dealer Contact:		Evolve CSR:
Phone #:		Fax #:
FABRIC INFORMATION		
Fabric Manufacturer:		
Color Name:		Color #:
Pattern Name:		Pattern #:
Content:		
Weight:		Width:
Repeat Horizontal:		Repeat Vertical:
Other Comments:		
REQUEST FOR APPLICATION TEST	T (THIS REQUIRES 2 YARDS OF FABRIC	C)
Compile Panel	Compile Tackboard	
Total Number of yards for testing:	compile rackboard	
Total Nulliber of Yalus for testing		
Please Note:		
Compile is not responsible for the dut	y and brokerage fees for C.O.M. Fabric to	clear customs. These charges will be billed to the dealer on a separate invoice.

PANEL FABRIC SPECIFICATION SHEET

SEND COMPLETED FORM TO:				
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SUPPLIER	REMARKS:			
PATTERN				
WIDTH				
CONTENT				
LIGHT FASTNESS	REMARKS:			
FLAMMABILITY				
TUNNER TEST				
CUT PRICE	REMARKS:			
1 - 3 ROLLS				
4 ROLLS				
DIRECTIONAL	REMARKS:	EASY HARD X-HARD		
PANELS CORNERS				
RACEWAY COVER				
RACEWAY CORNERS				
STRETCH				
APPROVED	NOT APPROVED	CONDITIONAL APPROVAL		
REMARKS:				
*This fabric is approved for upholster-ability only. The approval does not account for the durability of the fabric at the time of, and after installation of the product				
APPROVAL SIGNATURE: DATE:				

C.O.M AUTHORIZATION FORM FOR COMPILE PEDESTAL CUSHIONS

CUSTOMER INFORMATION

To be completed by the dealer/design firm. Use one form per textile. Incomplete information may delay or prevent approval.

A+D/Dealer/Company Name:	Contact:	Date:				
Billing Address:	Phone:					
×						
City: State: Zip:	Fax:					
End-User/Project Name:	End-User/Project Registered'	? YES NO If YES, The Evolve Quote#:				
TEXTILE APPLICATION INFORMATION						
MODEL NUMBER	QUANTITY	SPECIAL INSTRUCTIONS				
model nomben	20/11111	0. 201/L monitorion				
Textile Name (Series/Style #):						
Textile Color Name and Description:						
Country of Origin:						
Mill or Manufacturer's Name:						
Textile Content (% Cotton, % Poly, % Wool, etc.):						
Textile Width: Pattern Re	peat: VERTICAL HORIZONTAL	Rail Roaded? YES NO				
TEXTILE DIRECTION	NEW TEXTILE	PREVIOUSLY APPROVED TEXTILE				
	Attached textile sample (Minimum 5"x 5" Max 12"x 12") In correct DIRECTION and SIDE.	Fax completed form to: 856.596.5684				
	MAIL FORM AND TEXTILE SAMPLE ONLY TO: GLOBAL - COM Department					
	17 West Stow Road Marlton, NJ 08053 856.596.3390					
	Please contact your local EVOLVE CustomeCare representative for status of all COM requests. When textile is approved and an authorization number issued, a set of shipping instructions will be faxed or e-mailed to you.					
	Approved textiles are to be shipped to the address that will be included with instructions. Do not ship textiles to the address on this form. Dealer is responsible for the shipping expenses. Brokerage fees will be paid for by Global. However, duties imposed by North American Governments related to textile materials, content and Country of Origin, additional fees may apply and will be billed separately.					
*	Please Note: C.O.M Textiles may not be shipped without shipping documents. GLOBAL is not responsible for any material shipped without the authorization number.					
STAPLE FABRIC TO THIS FORM IN THE DIRECTION IN WHICH THE FABRIC IS TO BE UPHOLSTERED WITH THE LEFT SIDE OF THIS PAGE BEING THE SAME LEFT AS THE CUSHION.	Please be advised that Global has phased out the use of textiles that contain certain Phthalates, including but not limited to: DEHP (di (2-ethylhexyl) phthalate), DBP (di-n-butyl phthalate), BBP (butyl benzyl phthalate) and DINP (di-isononyl phthalate) (collectively the "Listed Chemiclas"). The Listed Chemicals are used in certain types of vinyls. Global cannot accept orders for textiles that contain the Listed Chemicals, if such orders are to be shipped to the U.S.A. or are intended for customer in the U.S.A. If you are not sure if the C.O.M you have selected contains the Listed Chemicals, please contact the manufacturer or supplier of the fabric to verify.					
EVOLVE AUTHORIZATION FORM (TO BE COMPLETED BY CUSTOMERCARE REP.)						
CAN#: TEXTILE	GU CODE:					
SIGNATURE:	DATE:					

TOP

STAPLE MINIMUM 6" X 6" **FABRIC SAMPLE HERE** IN THE DIRECTION IT IS TO BE **APPLIED TO THE PRODUCT**

BOTTOM