

Please fill out the below project requirement and a **SOLIDAL®** representative will respond within 24 hours. (If your enquiry is urgent, please call 1300 252 325)

Name*: Company:				
Phone*:				
Email*:				
New Project:		or	Recladding Projec	t:
Project Name:				
Location:				
Estimate Qty*:				
Comments:				
			For m	ore information please click on links below:
PRE-FABRICATION (Please select your prefer		ing method below - Tick Box):		
SOLIDAL® Cassette:			https://	/www.solidalmetal.com/solidal-cassette
SOLIDAL® Smartfix:			https://	/www.solidalmetal.com/smartfix-system
SOLIDAL® Perforated:			https://	/www.solidalmetal.com/solidal-perforated
SOLIDAL® Dimple:			https://	/www.solidalmetal.com/solidal-dimple
Comments:				
SAMPLE REQUIREM	MENT our Code			
Colour Sample Requ	est:			
Kynar® 500 PVDF:		Colour Code/Name:	https://	/www.solidalmetal.com/solidal-kynar-500-coilcoated-pvdf
Powder Coated Akzo N	Nobel Interpon:	Colour Code/Name:	https://	/www.solidalmetal.com/solidal-powdercoating
Anodise:		Colour Code/Name:	https://	/www.solidalmetal.com/solidal-anodised-top-bright-mirror
Custom Sample:				
Custom Colour to match	Architect Sample			
Custom Pattern Require	ed:			
Comments:				
FIRE CERTIFICATES	S REQUIREMENT			
AS1530.1:				
AS1530.3:				
Comments:				

Send file for **SOLIDAL®** representative to review: