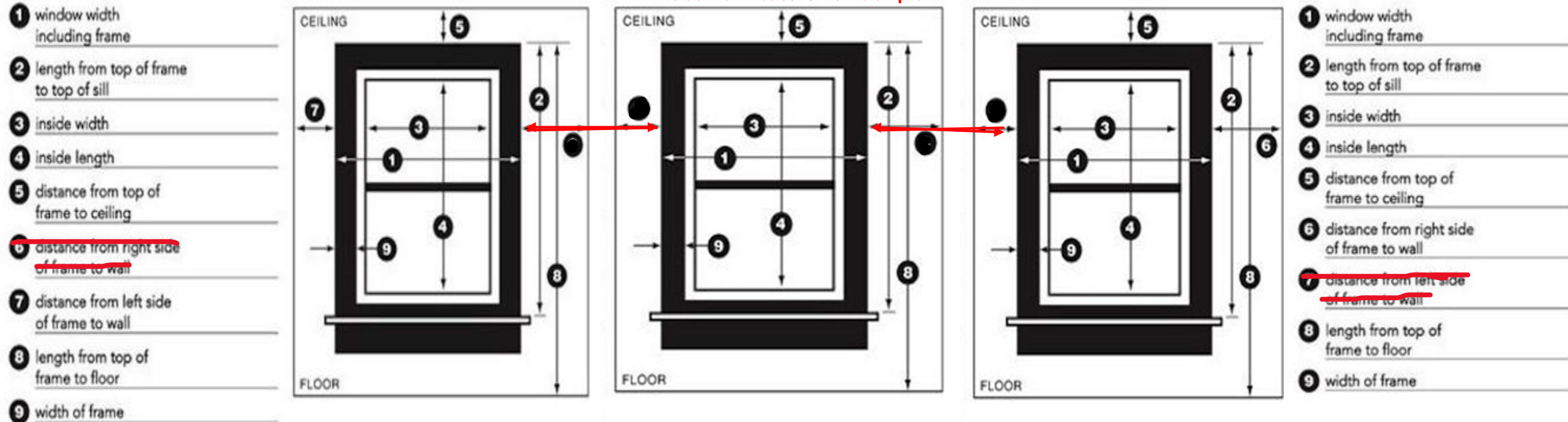


CLIENT'S OWN WINDOW MEASUREMENTS-3 Windows

Room_____

←→ SPACE IN-BETWEEN WINDOWS



- ✓ To ensure accuracy use a metal measuring tape only. Do not use a cloth tape or ruler.
- ✓ Double check all your numbers and record. Measure all windows even if they appear to be the same size.
- ✓ Note the location and type of window on separate forms. (i.e. family room-dining bay window-bedroom arch)
- ✓ Decorative rods using rings should be measured from the bottom of the ring for length. Also indicate # of rings and if you want returns to the outer walls.
- ✓ Take photo of all window angles, sides, top and bottom. (i.e. front of window, top to ceiling, side walls, bottom, etc.)

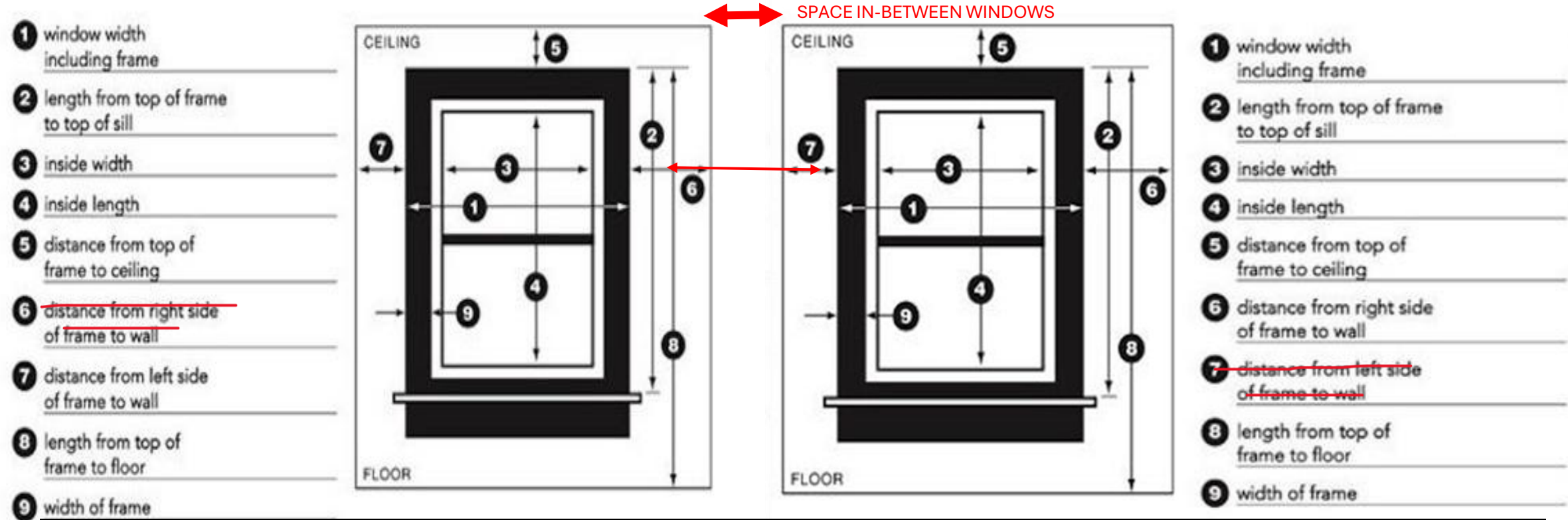
____Is there molding around the window? ____Are there existing rods? ____Will this be ceiling mounted?
____Is there ample space on the right and left (6-7) for the treatment you have chosen?
____Is there existing treatments, inside mounted? ____Is there existing treatments, outside mounted?

I have been given the opportunity to have SNT Home professionally measure my bed and declined. By providing my own measures I release SNT Home of any responsibility of final product outcome. By signing below, I approve these measures and accept full responsibility for their accuracy.

Client's Signature_____ Date_____ Staff_____ Date_____

CLIENT'S OWN WINDOW MEASUREMENTS-2 Windows

Room_____



- ✓ To ensure accuracy use a metal measuring tape only. Do not use a cloth tape or ruler.
- ✓ Double check all your numbers and record. Measure all windows even if they appear to be the same size.
- ✓ Note the location and type of window on separate forms. (i.e. family room-dining bay window-bedroom arch)
- ✓ Decorative rods using rings should be measured from the bottom of the ring for length. Also indicate # of rings and if you want returns to the outer walls.
- ✓ Take photo of all window angles, sides, top and bottom. (i.e. front of window, top to ceiling, side walls, bottom, etc.)

____Is there molding around the window? ____Are there existing rods? ____Will this be ceiling mounted?

____Is there ample space on the right and left (6-7) for the treatment you have chosen?

____Is there existing treatments, inside mounted? ____Is there existing treatments, outside mounted?

I have been given the opportunity to have SNT Home professionally measure my bed and declined. By providing my own measures I release SNT Home of any responsibility of final product outcome. By signing below, I approve these measures and accept full responsibility for their accuracy.

Client's Signature_____ Date_____ Staff_____ Date_____