



# Custom Audio Designs Ltd

## Custom Cut / Faced Acoustic Foam Disclaimer Form

PLEASE COMPLETE then SIGN, DATE and FAXBACK on:

# 01730 710524

**N.B. We CANNOT process your order without this form.**

Your Pro-forma / Invoice Number (if known):..... Your Company Name:.....

Your Name:..... Your Contact No.:.....

Type of foam required? (Please circle): Grey Melamine      White Melamine      Black FR foam

Thickness of foam required.....mm

Sheets / Tiles to be trimmed to what dimensions.....mm x .....mm

If you require a 45° chamfer then please specify the base height to the start of the chamfer and the rise height to top of the chamfer (as shown on the right):

Base.....mm

Rise.....mm



Self-adhesive backing to be applied? (Please circle) YES/NO

Any factory applied facing required? (Please circle Yes/No + facing required below) YES/NO

FGC.BK	FGC.WH	Black or White 200gms weavelocked glass cloth
FNG.BK	FNG.WH	Black or White neoprene coated glass cloth
FPG.WH		White polyurethane coated glass cloth
FPF.BK		Black Polyurethane film
FPU	Grey / White / Black	Unperforated PVC facing
FPP	Grey / White / Black	Perforated PVC facing
FAG		Maritex - aluminium foil laminated to glass fibre fabric
FOF		(BOAK) Reinforced aluminium foil
FMP		'23 micron metalised polyester film
FMP.SC		3 ply laminate of fibreglass scrim bonded to aluminium foil and polyester film
FVT.BK	FVT.WH	Black or White viscose tissue.

**I understand I am ordering custom cut / laminated / faced foam which is non-returnable at any time unless damaged in transit or due to a manufacturing defect.**

Name:.....

Date:.....