

BATTLE LUMBER COMPANY PALLET QUOTE SHEET

COMPANY NAME _____ DATE _____

CONTACT NAME _____

ADDRESS	BILLING ADDRESS (IF DIFFERENT)
_____	_____
_____	_____
_____	_____

TELEPHONE _____ FAX _____

PALLET SPECS

SIZE _____ X _____
(RUNNERS) (BOARDS)

QUANTITY		DIMENSIONS	LENGTH
_____	RUNNERS (STRINGERS)	_____ X _____	_____
_____	TOP DECK BOARDS	_____ X _____	_____
_____	TOP DECK BOARDS	_____ X _____	_____
_____	BOTTOM DECK BOARDS	_____ X _____	_____
_____	BOTTOM DECK BOARDS	_____ X _____	_____

_____ PALLET (DOUBLE FACE) _____ SKID (SINGLE FACE)
_____ 2-WAY _____ 4-WAY _____ 2-WAY _____ 4-WAY

_____ HEAT TREATED _____ AIR DRIED
_____ REVERSIBLE _____ NON-REVERSIBLE _____ CHAMFERED FOR PALLET JACK
_____ FLUSH _____ SINGLE WING, SIZE _____ _____ DOUBLE WING, SIZE _____
_____ CORNER CLIPPED _____ OTHER SPECIAL REQUIREMENTS _____
_____ WEIGHT LOAD _____ LOAD TYPE

SHIPPING INSTRUCTIONS: _____ SIDE LOAD _____ END LOAD

To receive a quote, fill out this form and fax to 478.252.1364

