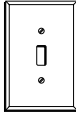
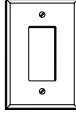
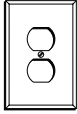


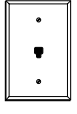
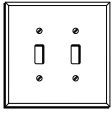
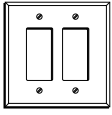
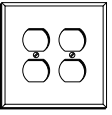
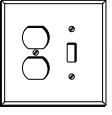
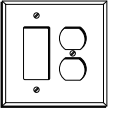
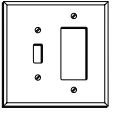
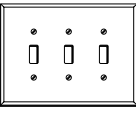
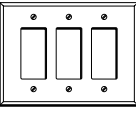
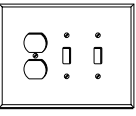
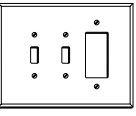
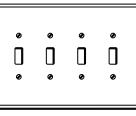
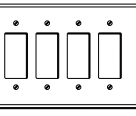


# Stonique® Plates Order Form

Dealer# \_\_\_\_\_

## Choose Your Plates: Standard Plate Styles

 <b>T101</b> Switch Color _____ Qty _____	 <b>T102</b> Decora (GFI) Color _____ Qty _____	 <b>T103</b> Duplex Color _____ Qty _____	 <b>T105</b> Blank Color _____ Qty _____	 <b>T110</b> T.V. Color _____ Qty _____	 <b>T117</b> Phone Color _____ Qty _____
 <b>T201</b> Double Switch Color _____ Qty _____	 <b>T202</b> Double Decora Color _____ Qty _____	 <b>T203</b> Double Duplex Color _____ Qty _____	 <b>T204</b> Combo Color _____ Qty _____	 <b>T205</b> Decora Duplex Color _____ Qty _____	 <b>T206</b> Decora Switch Color _____ Qty _____
 <b>T301</b> Triple Switch Color _____ Qty _____	 <b>T302</b> Triple Decora Color _____ Qty _____	 <b>T304</b> Triple Combo Color _____ Qty _____	 <b>T307</b> 2x Switch Decora Color _____ Qty _____	 <b>T401</b> Quad Switch Color _____ Qty _____	 <b>T402</b> Quad Decora Color _____ Qty _____

### Custom Plates

from wall chart  
Write code and Qty in below.

Code \_\_\_\_\_ Color \_\_\_\_\_  
**T** \_\_\_\_\_  
 Qty \_\_\_\_\_

Code \_\_\_\_\_ Color \_\_\_\_\_  
**T** \_\_\_\_\_  
 Qty \_\_\_\_\_

Code \_\_\_\_\_ Color \_\_\_\_\_  
**T** \_\_\_\_\_  
 Qty \_\_\_\_\_

*Please note:  
Custom plates are not returnable*

For plate configurations not shown, refer to our wall chart with over 100 different styles, or visit our website at:  
[www.GranitePlates.com/chart](http://www.GranitePlates.com/chart)

## Choose Your Color:

Series I Marbleized Colors		Series II Solid Colors	
Code	Color	Code	Color
CM .....	Cameo	LN .....	Linen
WH ....	Wheat	CL ....	Charcoal
HG .....	Honey Gold	BC .....	Biscuit
		TC ....	Terra Cotta
		CP .....	Cappuccino
		NO ....	Noce

## Payment Method:

Sold/Bill to: _____	Ship to: <input type="checkbox"/> same as bill to _____
Address _____	Address _____
City _____ St. _____ Zip _____	City _____ St. _____ Zip _____
Contact: _____ Phone: _____	Fax: _____ PO# _____

Payment Method:  Visa  MasterCard  AmEx  Certified Check Enclosed  Fax Pro-Forma and hold for Certified Check /Money Order

Name on Card _____	Billing Address _____
CC# _____	City _____ St. _____ Zip _____
CVC _____ (3-digit code on back of card) Exp. Date ____/____	Authorized Signature _____