



**Request for Quote Form:  
Mod Highback**

Date:

**Due Date:**

**Contact Information**

Dealer / Specifier:

Company Name:

Ship to State/Zip:

Phone:

Project Name:

Email:

Project Size:

HBF Sales Rep:

Project Type:

Rep Code:

Drawing Format:

HBF CSR:

Special Compliance:

Contract Type:

Product Type:

Quantity    Model Description + Number

Textiles: Panel Surround (Outer) Upholstery

Textiles: Cushion Upholstery

Flammability

Leg Finish

Power

COM / COL:

COM / COL Patterns of Color:

COM / COL Supplier:

Attachment

- \*\*\* Immediately after completion of form:
1. Select printer option
  2. Save as Adobe PDF (on your desktop or elsewhere)
  3. Retrieve PDF saved version
  4. Email directly to Design Services at [HBFDS@hbf.com](mailto:HBFDS@hbf.com).

|   |
|---|
| <p><b>For Internal Us</b></p> <p>Date Request Received:</p> <p>Date Quote Co</p> <p>Completed By:</p> |
|---|



**Request for Quote Form:  
Mod Highback  
Additional Information**

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|--|
| <p><b>For Internal Use Only</b><br/>Date Request Received:<br/>Date Quote Completed:<br/>Completed By:</p> |
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