



Request for Quote  
**Max Modular**

Date:	Rep Code:
Due Date:	Specifier:
Project Name:	Drawing Format:
HBF Sales Rep:	Project Size:
Dealer:	Quantity:
HBF CSR:	Ship to State/ZIP:

Contract Type:	
Product Type:	
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Model Number:	QTY:
Description:	
COM/COL:	
COM/COL Supplier:	
COM/COL Pattern or Color:	
Graded Fabric or Leather:	
Outer Upholstery:	
Cushion Upholstery:	
Special Compliance:	
Metal Leg Finish:	
Flammability:	
Attachment:	

Note: Modular pieces ship with 2 additional legs with connector brackets for placement in any configuration.

Please refer to price lists published on **HBF.com** for product specifics.

*Please add attachment to email along with this form. For Modular orders a layout is required. Please attach or add to page 2.*

<p><b>For Internal Use Only</b></p> <p>Date Request Received:</p> <p>Date Quote Completed:</p> <p>Completed By:</p>
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*\*\*\* Please note: Immediately after completion of form please: 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)*



Request for Quote  
**Additional Information**

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Date Quote Completed:

Completed By: