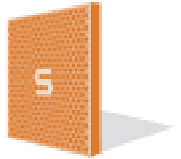


INFRA-RED RADIANT HEATERS

SPECIAL PROJECT QUOTATION

Schwank

infra-red gas heaters



CUSTOMER NAME: _____

COMPETITION: _____

CONTACT: _____

PROJECT CLOSES: _____

PHONE NUMBER: _____

SHIPPING DATE: _____

FAX NUMBER: _____

PRICE PROTECTION REQUIRED: Yes No

ENGINEER: _____

COMMENTS: _____

SCHWANK: SPECIFIED: EQUAL ALTERNATE

JOB NAME: _____

CITY: _____ PROV: _____

[illegible]

FOR INTERNAL USE ONLY

DATE RECEIVED:

QUOTE NO.

FAXED: YES NO

TIME RECEIVED:

CUSTOMER NO.

NOTES: 1. Schwank must receive written confirmation of this request from the distributor.

2. Request must be sent directly to the National Sales Manager fax **905-712-8336**
3. Requests received without competitive price information will be priced at standard distributor net less Co-op (1%).
4. Requests without distributor, Engineer, job name, etc. will be denied.

REQUESTED BY: _____

ATTENTION: JIM MCLELLAN