

PADOVA

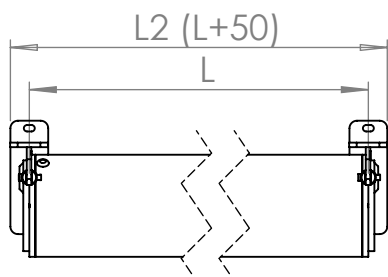
MODULO D'ORDINE - ORDER FORM

larghezza/width

*misure in mm/ measures in mm

Attacco con supporto
Installation with brackets

Tipo: A, B, C, D, E

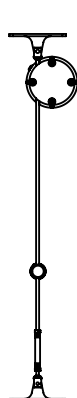


A



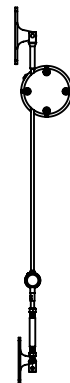
Parete - pavimento
Wall-floor

B



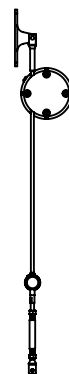
Soffitto - pavimento
Ceiling- floor

C



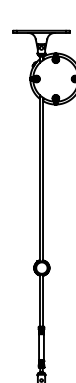
Parete - parete
wall-wall

D



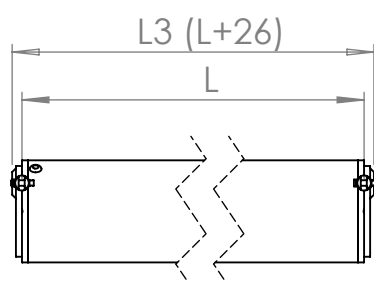
Partete/soffitto - diretto a pavimento
Wall/ceiling - direct installation

E



Attacco diretto senza supporto
Direct installation

Tipo: F



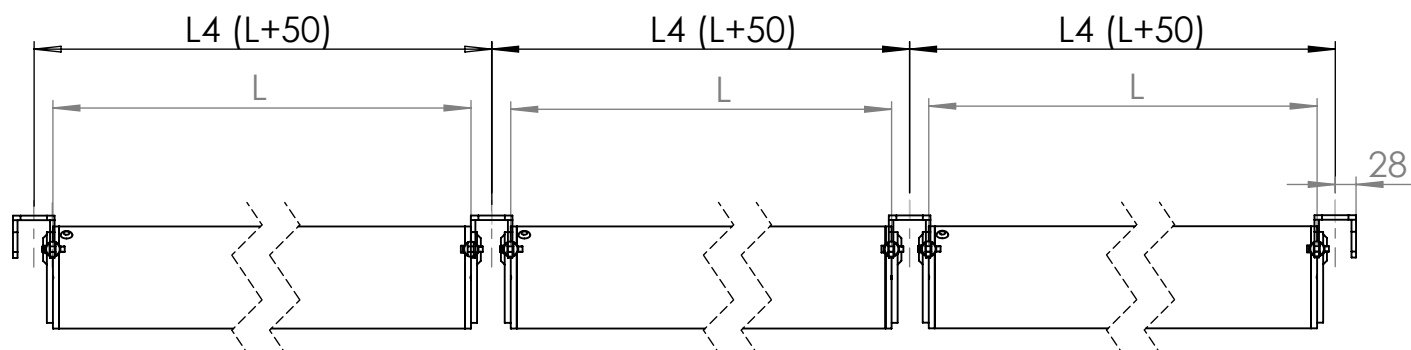
F



Soffitto - pavimento diretto
Ceiling - direct floor installation

Attacco in serie
Serie installation

Tipo: A, B, C, D, E

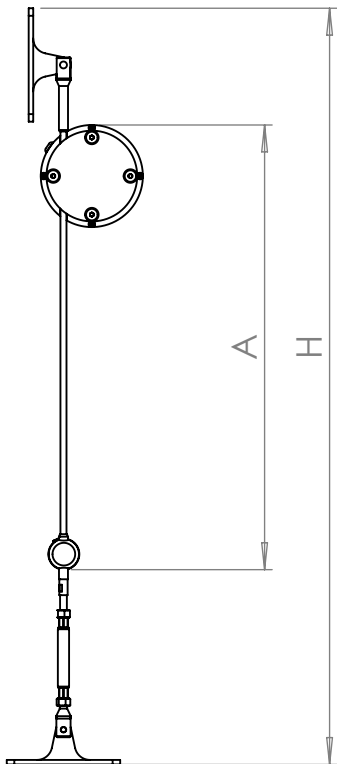


PADOVA

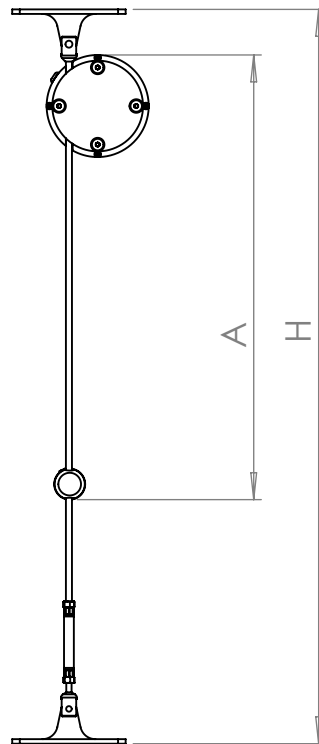
altezza/height

*misure in mm/ measures in mm

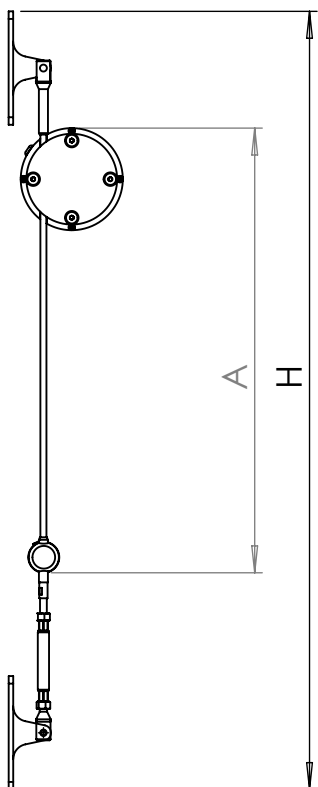
A) muro con supporto / wall with bracket
pavimento con supporto / floor with bracket



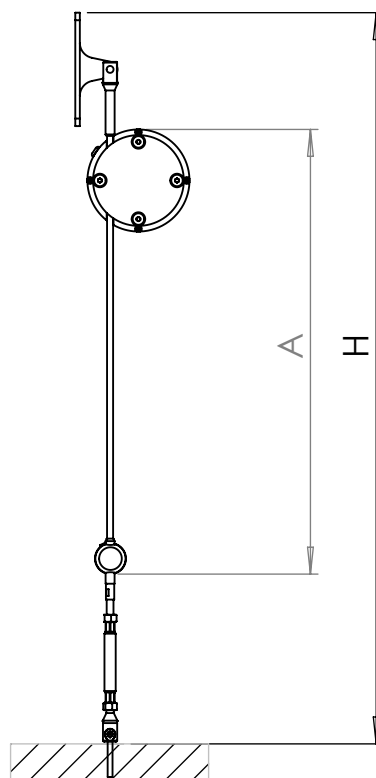
B) soffitto con supporto / ceiling with bracket
pavimento con supporto / floor with bracket



C) muro con supporto / wall with bracket



D) muro con supporto / wall with bracket
pavimento diretto / direct floor installation



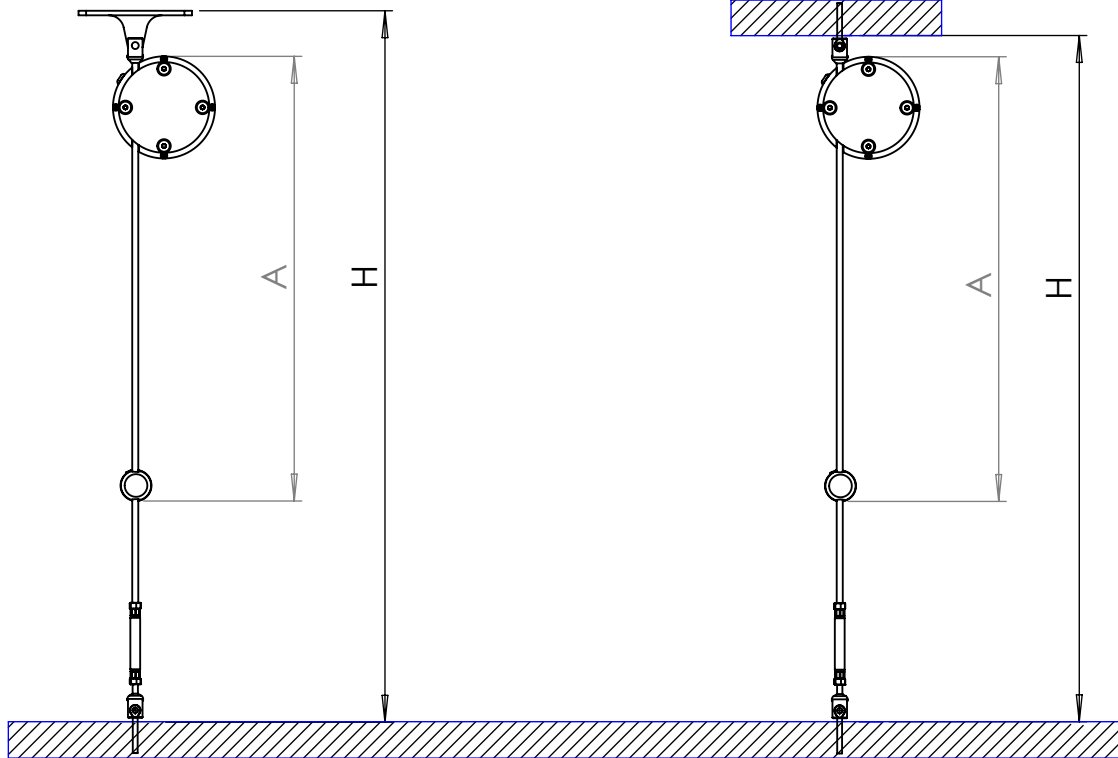
PADOVA

altezza / height

*misure in mm/ measures in mm

E) soffitto con supporto / ceiling with bracket
pavimento diretto / direct floor installation

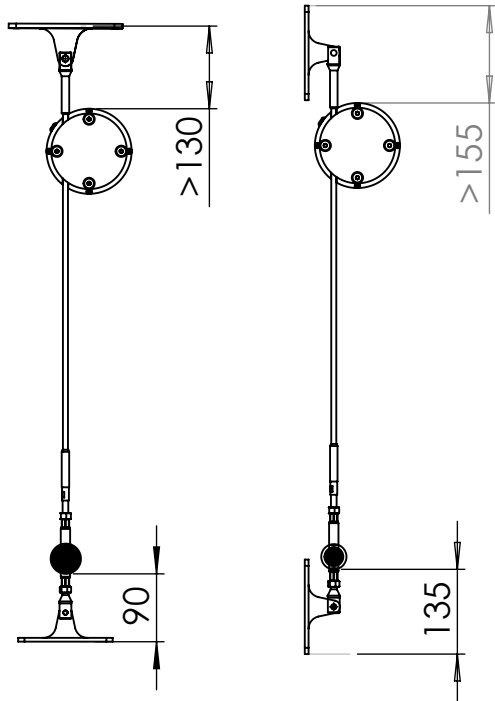
F) soffitto diretto / direct ceiling installation
pavimento diretto / direct floor installation



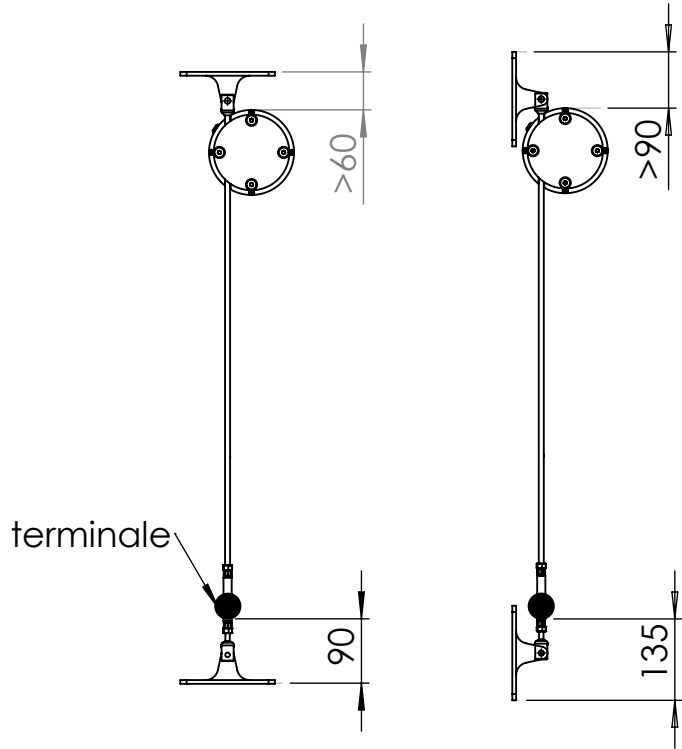
Interasse fori di fissaggio e ingombri tecnici altezza

Fixing holes distances and overall dimensions

Padova a fune
Padova with wire rope

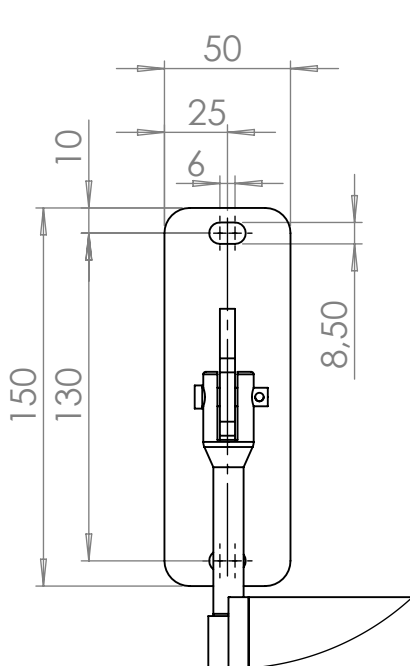


Padova a tondino
Padova with iron rope

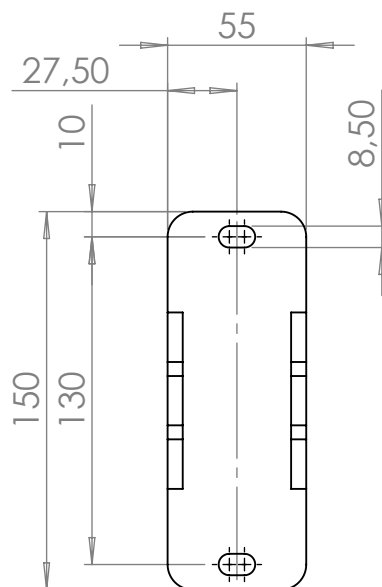


* misure in mm
* measures in mm

Dettaglio del supporto
Brackets details



Singolo/single



Doppio/double

PADOVA

MODULO D'ORDINE

Fax: +39 049 8790102

ordini@marinellotende.com



Nome cliente
 azienda _____
 riferimento _____

Richiesta
 preventivo
 ordine

Tenda
 colore _____
 tondino
 fune

Telo
 nome modello _____
 codice colore _____
 confezione _____
 steccatura

Attacco
 singolo
 in serie

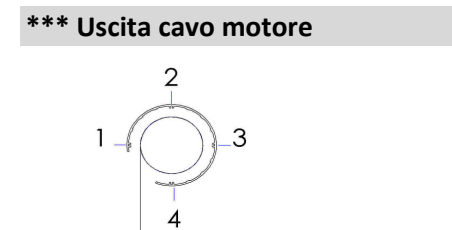
Configurazioni

| | | | |
|---|--------------------------|---|--------------------------|
| A | <input type="checkbox"/> | D | <input type="checkbox"/> |
| B | <input type="checkbox"/> | E | <input type="checkbox"/> |
| C | <input type="checkbox"/> | F | <input type="checkbox"/> |

Manovra (vista esterna)

motore
 finecorsa elettr.
 radio

telecomando
 monocale _____ q.tà
 multicanale _____ q.tà



| Quantità | Larghezza misura finita | |
|----------|-----------------------------|--------------------------------------|
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |

| Altezza misura finita | |
|-----------------------|-------------|
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |

| Lato manovra vista esterna | |
|-----------------------------|-----------------------------|
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |

| Uscita cavo motore del cassonetto *** | | | |
|---------------------------------------|----------------------------|----------------------------|----------------------------|
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

Privacy

Ai sensi del D.Lgs.n°196/2003 Vi informiamo che i dati a Voi relativi in nostro possesso sono trattati nel rispetto del sopraccitato D.Lgs e dei consueti obblighi di riservatezza, e per le sole finalit' amministrative-contabili. Vi sono riconosciuti di cui all'art.7 del D.Lgs. 196/2003.

Data: _____

Firma: _____

PADOVA

ORDER FORM

Fax: +39 049 8790102

ordini@marinellotende.com



Client

company _____

reference _____

Request

quote

order

Blind model

colour _____

tondino

rod

Fabric

model _____

colour code _____

reinforcement

Installation

single

in series

Configuration

A D

B E

C F

Handling (external view)

motor

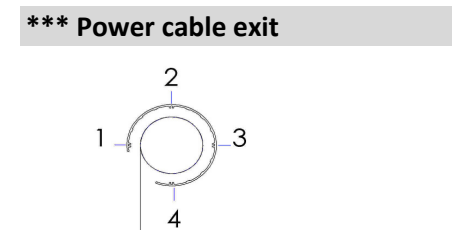
electris end stop

remote

remote control

single channel _____ n°

multi-channel _____ n°



| Quantity | Width exact measure | |
|----------|-----------------------------|--------------------------------------|
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |
| _____ pz | L1 <input type="checkbox"/> | L4 <input type="checkbox"/> _____ mm |

| Height exact measure (A) | |
|--------------------------|-------------|
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |
| A: _____ mm | H: _____ mm |

Handling side (external view)

| | |
|-----------------------------|-----------------------------|
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |
| sx <input type="checkbox"/> | dx <input type="checkbox"/> |

Motor wire box exit ***

| | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
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| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

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Date: _____

Signature: _____