

# CUSTOMER ANGLED CORNER DETAIL

Name: \_\_\_\_\_  
 Email: \_\_\_\_\_

Date: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Quote/Invoice #

**CABLE RUN:**

90°

45°

**OUTSIDE  
ANGLE**

**QTY**

**CABLE RUN:**

90°

45°

**OUTSIDE  
ANGLE**

**QTY**

**CABLE RUN:**

90°

45°

**OUTSIDE  
ANGLE**

**QTY**

**CABLE RUN:**

90°

45°

**OUTSIDE  
ANGLE**

**QTY**

RECTANGULAR

SHAPED

COLOR

By entering my name below I certify that the numbers and measurements specified on this form are correct and that fabrication of my product will be based on the information above that I have provided.

X \_\_\_\_\_