VISION SERIES by Coral

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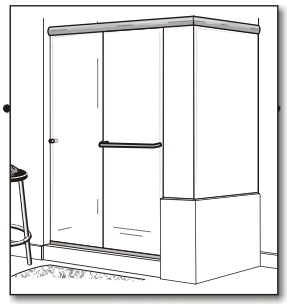
Design Worksheet for Bypass Doors



Company _____ **Date** _____

Contact _____ **Phone** _____

Job Name _____ **Fax** _____

Glass Type / Thickness: . . ☐ Clear 3/8" . . . . . ☐ Pattern 3/8" _____ *(Specify pattern)* . . . ☐ Specialty 3/8" _____ *(Specify pattern)*

Hardware Color / Finish: _____

Fixed Panel Securing: . . . ☐ U-Channel . . . . . ☐ Clamps

Towel Bar: . . . ☐ Towel Bar. . . . . ☐ Towel Bar / Pull Knob Combination . . . . . ☐ Knob

- Tubular Escutcheon ☐ Yes . ☐ No
- Designer _____

- Tubular Escutcheon ☐ Yes . ☐ No
- Designer _____

- Type _____

Vertical Seals: . . . . ☐ No . . . . . ☐ Yes → ☐ T-Seal . . . . . ☐ L-Seal . . . . . ☐ Other _____

Corner Joint: . . . . . ☐ Mitered . . . . . ☐ Overlapped

Glass Meets Wall @: . . . . . ☐ 90 Degree . . . . . ☐ Other _____

Knee Wall or Step: . . . . . ☐ Yes . . . . . ☐ No

Glass Meets Knee Wall @: . . . . . ☐ 90 Degree . . . . . ☐ Other _____

Please Provide Centerline Dimensions.
All Out-of-Plumb Walls and Out-of-Level Thresholds Must be Noted.

Coral Industries • P.O. Drawer 40228, Tuscaloosa, AL 35404-0228 • (205) 345-1013, (800) 772-7737 • FAX (800) 755-9427 • E-mail coral@coralind.com