CUSTOM FABRIC FORM

For internal use only				
Tracking #				
Date				



All information below needs to be supplied in order to process your request and one (1) yard of the fabric must be sent. Additional material may be requested. Please include this form and a Cal-117 certification (if applicable) to all test requests. If fabric is reversible, please indicate up side with a color swatch. Remember that fabric (C.O.M.) is priced at grade 2 and vinyl (C.O.V.) is priced at grade 3. Contact the C.O.M. coordinator with any questions.

Please send this form to COM-Info@groupelacasse.com.

General information

Date of request	Ship one (1) yard of the selected upholstery to one
Customer name	of the following addresses:
Contact person	For Brylee, Rackup, Sabbia and Upswing, send fabric samples to:
Phone #	Via Seating
E-mail address	Attn: Fabric Dept. 205 Vista Blvd, Sparks Nevada 89434
	For all other United Chair and Arold products: Attention: C.O.M. Testing Groupe Lacasse 175 Saint-Pierre Saint-Pie, QC JOH 1W0 Canada

Textile information

	Re	sults				
Test #	Passed	Failed	Supplier	Pattern name	Pattern #	Color
1.						
2.						
3.						
4.						
5.						

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	Please check		Orientation		Reversible fabric?		Is fabric Cal-117?		Backer type
	Fabric	Vinyl	Off the roll	Railroaded	Yes	No	Yes	No	(If applicable)
1.									
2.									
3.									
4.									
5.									

Other comments