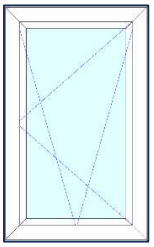
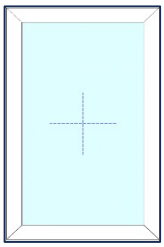
INTEX DOORWIN LTD.

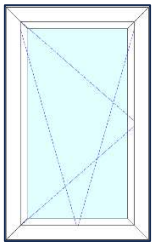
Window Measurement Take-off Sheet

331 HWY #52 W
Mitchell MB
R5G 0Z2
sales@intexdoorwin.com

Name: _____
Phone #: _____
Email: _____
Job reference: _____
Address: _____


Tilt & Turn Left


Picture
Viewed from outside


Tilt & Turn Right

Location: _____
Quantity: _____

Wall thickness: _____

Window Measurements (fill out one type ONLY)

Type	Width	Height
OSBM		
R.O.		
Frame Size		

Exterior (select one)
- ☐ Nail flange
- ☐ Reno Brickmold
- ☐ None

Interior (select one)
- ☐ Drywall Return
- ☐ Jamb Extension
- ☐ None

Sketch (viewed from outside)

Notes: _____

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Sketch (viewed from outside)

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