

TAPPETO

RETTO 20x20x1,3

Ausführungen

LV

AK

LCD

OP

PCS Gerades .....

Tinta Unita - m<sup>2</sup> .....

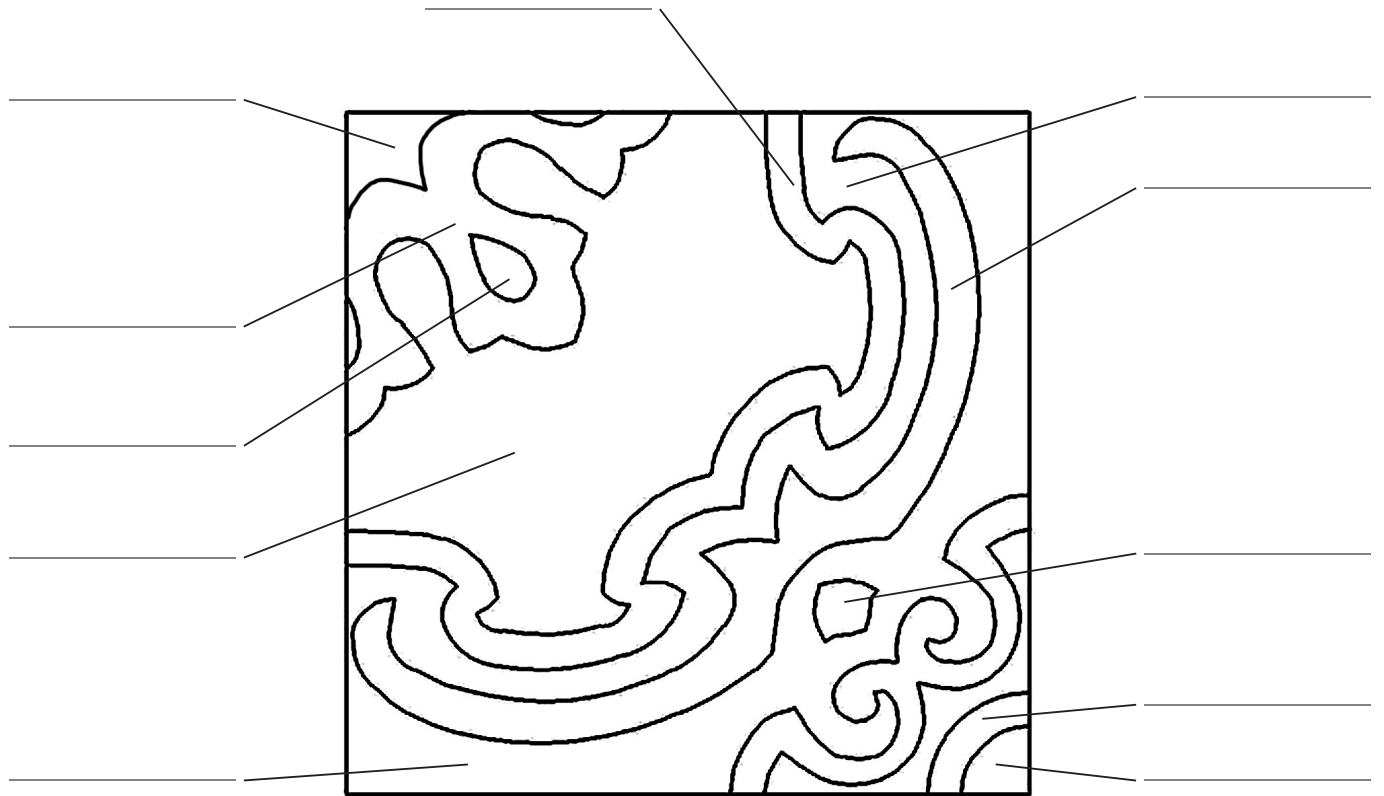
Tinta Unita - m<sup>2</sup> .....

sockelleiste - lfm .....

Colour .....

Colour .....

Colour .....



FARBEN

GRANIGLIA

- |                                    |                                     |                                     |
|------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> AV AVORIO | <input type="checkbox"/> RS ROSA    | <input type="checkbox"/> VD VERDINO |
| <input type="checkbox"/> BI BIANCO | <input type="checkbox"/> SA SALMONE | <input type="checkbox"/> VE VERDE   |
| <input type="checkbox"/> GR GRIGIO | <input type="checkbox"/> RO ROSSO   | <input type="checkbox"/> MA MARRONE |
| <input type="checkbox"/> NE NERO   | <input type="checkbox"/> GI GIALLO  | <input type="checkbox"/> AZ AZZURRO |

PASTINA

- |                                     |                                    |                                     |
|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> AV AVORIO  | <input type="checkbox"/> GI GIALLO | <input type="checkbox"/> SA SALMONE |
| <input type="checkbox"/> RO ROSSO   | <input type="checkbox"/> SB SABBIA | <input type="checkbox"/> GR GRIGIO  |
| <input type="checkbox"/> MA MARRONE | <input type="checkbox"/> VE VERDE  | <input type="checkbox"/> NE NERO    |
| <input type="checkbox"/> AZ AZZURRO |                                    |                                     |

KUNDE

Kundenummer ..... Unsere Bestellnummer .....

Auftraggeber ..... Ihre Referenz .....

Adresse .....

PLZ. .... Stadt .....

Telefon ..... Fax ..... Mobil Tel. ....

MwSt. / Steuer-Code .....

KUNDE

ZUR ANNAHME

PAVIMENTI FOGAZZA SNC

Datum .....