

Customer Name:.....

Address:.....

.....

.....Post Code.....

Telephone Number:.....



DANILO LUCCHI UK

*Forma Soft*

UK WAREHOUSE Unit 6, 636 South Street  
Whiteinch, Strathclyde G14 0TR  
Tel: 0141 576 2970 Fax: 0141 576 0250  
WEB: [www.dlopellami.com](http://www.dlopellami.com)  
EMAIL: [trimshp7@dialstart.net](mailto:trimshp7@dialstart.net)

**Order Confirmation**

Make & Model: .....  
Year: .....  
No. of doors: .....  
No. of seats: .....  
Colour / Code: .....  
Pattern Code: .....

**Please indicate the specification you require**

Front seats: Standard  / Sports   
Electrical  / Non-Electrical   
Airbag  / Non-Airbag   
Front armrest: Not applicable  / Closed  / Glove compartment   
How many:.....  
Rear seat cushion: Fixed:  / 60/40 split  / 50/50 split   
Baby seat  / No baby seat   
Rear seat back: Fixed  / 60/40 split  / 50/50 split   
Rear arm rest: Not applicable  / Closed  / Glove compartment   
How many:.....  
Front head rests: Full  / With hole in middle   
Separate to seat  / Incorporated with seat   
How many:.....  
Rear head rests: Full  / With hole in middle   
Separate to seat  / Incorporated with seat   
How many:.....  
Front door panels: Not applicable  / Airbag  / Non-Airbag   
How many:.....  
Rear door panels: Not applicable  / Airbag  / Non-Airbag   
How many:.....  
Piping: Yes  / No   
Colour / Code:...../.....  
Seat inserts: Perforated  / Rouched  / Flat   
Colour / Code:...../.....  
Door panels: Perforated  / Plain   
Colour / Code:...../.....  
Contrasting stitching: Yes  / No   
Colour / Code:...../.....

Required fitting date (please specify a date, not ASAP):.....

Additional requirements: .....

Please NOTE the leather interior specification detailed above must match the vehicle exactly. The purchaser is responsible for any errors or omissions arising from incorrect information given on this order form.

Authorised signature:.....