

# COLOR SAMPLE INFORMATION

Please complete this form (one for each different sample) and include it when you send us your sample. Our lab requires this information to formulate a custom Jahn product. We cannot process your sample without it. **For all sample colors a lab fee will be required, and must be received before the color matching process will begin.**

Thank you!

Person in charge of color approval: \_\_\_\_\_  
(Architect, Consultant, Owner?)

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Building or Project Name: \_\_\_\_\_

Address: \_\_\_\_\_

Type of Masonry: \_\_\_\_\_  
(i.e.: Brownstone, Limestone, Brick, Terra Cotta, Precast, Pointing Mortar, etc.)

Contractor's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Contact: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

## Please answer the following questions about your sample:

Surface to be matched?  exposed  fractured

Will the building be cleaned?  yes  no Has the sample been cleaned?  yes  no

Note: We do not clean samples. If the building has or will be cleaned, the sample to be matched must also be clean.

Will the patches be textured?  yes  no Explain: \_\_\_\_\_

Will the patches be: painted? sealed? left alone? (Circle applicable)

Are you patching steps, pavers or other traffic areas?  yes  no

## For your sample, would you like the:

closest Standard Jahn Mortar (\$25.00 for each finished sample and 1 quart of mortar)

Custom Jahn (\$50.00 for each finished sample and 1 quart of mortar)

Have the contractors attended the Jahn Applicator Workshop?  yes  no

Name of Authorized Installer: \_\_\_\_\_

Authorized Installer #: \_\_\_\_\_

How much do you anticipate needing? \_\_\_\_\_ sq. ft. @ \_\_\_\_\_ depth (or # of pails: \_\_\_\_\_) When? \_\_\_\_\_

Submitted by: (Signature) \_\_\_\_\_

## **If you would like to pay the lab fee by credit card, please complete the following:**

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card Holder's Name: \_\_\_\_\_ Card Holder's Signature: \_\_\_\_\_

Billing Address (if different from above) \_\_\_\_\_