Contactless Estimate Sheet

Step 1 - Project Goals

What are you wanting to achieve? *(Mark X on all that apply)*

- ☐ Heat Reduction
- ☐ Glare Control
- ☐ UV Protection
- ☐ Fade Reduction
- ☐ Privacy
- ☐ Safety/Security
- ☐ I don't want the tint to change the appearance of my windows
- ☐ I don't want the tint to have a reflective or mirrored Finish
- ☐ My windows have existing tint that will need to be removed

I would like a quote for:

- ☐ Professional Suggestion
- ☐ Select Ceramic (non-reflective)
- ☐ Traditional Metalized (privacy)
- ☐ Decorative/Frosted
- ☐ Security
- ☐ Removal

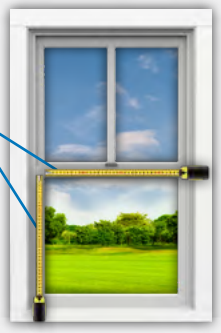
Project Timeline:

- ☐ As soon as possible
- ☐ In the next week or two
- ☐ I'm not sure

Step 2 - Take Measurements

Please provide measurements for each window you would like to have window tint applied to.

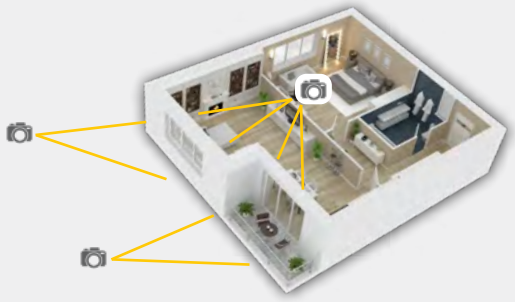
Measure the dimension of each pane of glass.



Number of Panes	Width		Height	Location/Room	Exposure
Example: 6	*35*	x	*28*	*Living Room*	*West*
		x			
		x			
		x			
		x			
		x			
		x			
		x			
		x			
		x			
		x			
		x			
		x			
		x			

Step 3 - Take Pictures

Please provide 3 pictures of each area you would like to have window tint applied to.



Step 4 - Submit Information

Please provide your contact information :

Name: Phone #:

Address:

City: Zip Code:

Email:

Please TEXT or EMAIL this form and pictures to:

Text: **(248) 599-2975**

Email: **info@michigantinting.com**

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