



RETROTEC & INGLIS CYCLES ORDER FORM



DATE: _____

NAME: _____ CELL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

ALTERNATE PHONE NUMBER: _____ EMAIL: _____

FRAME TYPE BEING ORDERED (CHECK ONE):

ROAD

- | | |
|---|--|
| <input type="checkbox"/> INGLIS | <input type="checkbox"/> FULL SUSPENSION |
| <input type="checkbox"/> RETROTEC CLASSIC | <input type="checkbox"/> TANDEM |
| <input type="checkbox"/> RETROTEC HALF | |
| <input type="checkbox"/> RETROTEC TWIN | |
| <input type="checkbox"/> RETROTEC TRIPLE | |
| <input type="checkbox"/> RETROTEC DOUBLE | |

<u>MOUNTAIN</u>	<u>26"</u>	<u>+</u>	<u>27.5</u>	<u>+</u>	<u>29"</u>	<u>+</u>	<u>SINGLESPEED</u>	<u>GEARED</u>
<input type="checkbox"/> INGLIS STEEL	___	___	___	___	___	___	___	___
<input type="checkbox"/> RETROTEC CLASSIC	___	___	___	___	___	___	___	___
<input type="checkbox"/> RETROTEC HALF	___	___	___	___	___	___	___	___
<input type="checkbox"/> RETROTEC TWIN	___	___	___	___	___	___	___	___
<input type="checkbox"/> RETROTEC TRIPLE	___	___	___	___	___	___	___	___
<input type="checkbox"/> RETROTEC DOUBLE	___	___	___	___	___	___	___	___

CYCLOCROSS/GRAVEL GEARED OR SINGLESPEED

<input type="checkbox"/> INGLIS STEEL	___	___
<input type="checkbox"/> RETROTEC CLASSIC	___	___
<input type="checkbox"/> RETROTEC HALF	___	___
<input type="checkbox"/> RETROTEC TWIN	___	___
<input type="checkbox"/> RETROTEC TRIPLE	___	___
<input type="checkbox"/> RETROTEC DOUBLE	___	___

WELDING (CHOOSE ONE)

TIG: ALL TIG WELDED FRAMES ARE POWDERCOATED ONE COLOR. IF INTERESTED IN WET PAINT, PLEASE SEE "EXTRAS" SECTION OF ORDER FORM FOR ADDITIONAL PRICING.

FILLET: ALL FILLET BRAZED FRAMES ARE WET PAINTED ONE COLOR. ADDITIONAL COLORS, SCALLOPED TWO TONE OR SPECIAL ART, PLEASE SEE "EXTRAS" SECTION OF ORDER FORM FOR PRICING. ALL BOTTOM BRACKETS ARE TIG WELDED.

FILLET BRAZED BOTTOM BRACKET – ADDITIONAL \$300

LUGGED: ALL LUGGED FRAMES ARE WET PAINTED ONE COLOR. ADDITIONAL COLORS, SCALLOPED TWO TONE OR SPECIAL ART, PLEASE SEE "EXTRAS" SECTION OF FORM FOR PRICING.

SIZING (CHOOSE ONE)

___ HEIGHT ___ INSEAM ___ THIGH LENGTH ___ BODY LENGTH

___ ARM LENGTH ___ SHOULDER WIDTH ___ RIDING SHOE SIZE

___ AGE ___ WEIGHT ___ GENDER (M/F) **SEE MEASURING INSTRUCTIONS**

ADDITIONAL OPTIONS

___ PF30 BB - \$60

___ ECCENTRIC BOTTOM BRACKET - \$100

___ T47 - \$60

___ SYNTACE 12X142 PARAGON REAR DROPOUTS INCLUDES AXLE \$80

___ SYNTACE 12X148 PARAGON REAR DROPOUTS INCLUDES AXLE \$80

___ TAPERED HEAD TUBE (NO EXTRA CHARGE)

___ 44MM HEADTUBE (NO EXTRA CHARGE)

___ INTERNAL REAR BRAKE CABLE - \$200

___ EXTRA BOTTLE MOUNT - \$40

___ REAR RACK MOUNTS - \$50

___ FENDER MOUNTS - \$60

BRAKES (CHOOSE ONE)

___ DISC: ___ CABLE ACTUATED OR ___ HYDRAULIC

___ V – BRAKES

___ BRAKES ON CHAIN STAY ___ (Y/N)

ADDITIONAL INFORMATION

FORK TYPE BEING USED OR PURCHASED FOR THIS FRAME: _____

CURRENT BICYCLE INFORMATION: _____

COMPONENT PACKAGE (IF ANY): _____

_____(CALL OR EMAIL FOR PRICE QUOTE)

FORK

___ UNICROWN \$320 ___ SEGMENTED \$450 ___ (Y/N) SUSPENSION CORRECTED

___ LUGGED FORK \$370

STEM

___ CUSTOM STEM \$275 ___ CUSTOM STEM WITH REMOVABLE FRONT PLATE \$300

___ S & S COUPLERS ADD \$600

FRAME COLOR (RAL NUMBER): _____

PAINT UPGRADES: _____

EACH FRAME COMES WITH A SINGLE COLOR INCLUDED IN THE PRICE. ADDING EXTRA COLORS AND/OR CUSTOM PAINT WORK, PLEASE CONTACT US FOR A QUOTE.

DEPOSIT AMOUNT: _____

CUSTOMER SIGNATURE: _____

PLEASE RETURN COMPLETED FORM AND DEPOSIT TO:

RETROTEC / INGLIS CYCLES
P.O. Box 3714 NAPA, CA 94558
707-258-2203 WWW.INGLISCYCLES.COM INFO@INGLISCYCLES.COM

MEASURING INSTRUCTIONS

HEIGHT: CUSTOMER'S HEIGHT WITHOUT SHOES ON, MEASURE TOP OF HEAD TO FLOOR, WHILE STANDING AGAINST A WALL, FEET SHOULD BE SHOULDER WIDTH APART.

INSEAM: CUSTOMER SHOULD REMOVE SHOES AND STAND AGAINST A WALL, FEET SHOULD BE SHOULDER WIDTH APART, PLACE A RULER BETWEEN THE LEGS SO THAT IT HAS CONTACT WITH THE PELVIS (DON'T SHOVE THE RULER UP INTO THIS AREA UNTIL IT'S UNCOMFORTABLE, JUST MAKE CONTACT). USING A TAPE MEASURE, MEASURE FROM THE TOP OF THE RULER TO THE FLOOR.

THIGH LENGTH: HAVE THE CUSTOMER KNEEL ON THE FLOOR, KNEES SHOULDER WIDTH APART, AND PERFORM THE SAME MEASURING PROCEDURE AS WAS DONE IN INSEAM SECTION, MEASURING FROM TOP OF RULER TO FLOOR WHILE KNEES AND UPPER BODY ARE STRAIGHT.

BODY LENGTH: MEASURE FROM THE STERNUM (THE SOFT FLESH PART BETWEEN THE COLLAR BONES AT THE TOP OF THE CHEST AND BELOW THE ADAM'S APPLE) TO THE FLOOR WHILE STANDING AGAINST A WALL WITHOUT SHOES ON, FEET SHOULDER WIDTH APART.

ARM LENGTH: RAISE ONE ARM TO A 30 DEGREE ANGLE AWAY FROM THE BODY AND MEASURE FROM THE ACROMION PROCESS (THE BONE ON TOP OF THE SHOULDER THAT STICKS OUT AND HELPS YOU MOVE AND ROTATE YOUR SHOULDER) TO THE TOP OF THE KNUCKLES.

SHOULDER WIDTH: MEASURE BETWEEN THE RIGHT AND LEFT ACROMION BONES.

IF YOU ARE HAVING TROUBLE UNDERSTANDING THESE MEASURING DIRECTIONS, EMAIL OR CALL US.