

DISTRIBUTOR INFORMATION		DEALER INFORMATION		SHIP TO ADDRESS	
NAME:		NAME:			
LOCATION:		CITY:			
CONTACT:		S45 ID #:			

**CHECK ONE**

QUOTE ONLY       ORDER

**ORDER INFORMATION**

QUOTE #:

SO#

PO#

**CUSTOMER TAG NAME:**

**EXTENDED WARRANTY PROGRAM**

GOLD (\$1,500 & 5 YRS WATER & LABOR)

SILVER (\$1,000 & 4 YRS WATER & LABOR)

**NOTE: COMPLETE MEASURING FORM MUST INCLUDE THIS COVER SHEET, PLUS SHAPE MEASURING FORM. A STEP MEASURING FORM MUST BE INCLUDED WHERE APPLICABLE.**

**BASIC LINER INFORMATION**

<input type="checkbox"/> BEADED (IF NOT STANDARD BEAD, WHAT TYPE: ( _____ ))	FIBERGLASS STAIRS <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, <input type="checkbox"/> STRAIGHT <input type="checkbox"/> RADIUS DRAW LOCATION ON SHAPE MEASURING FORM
<input type="checkbox"/> OVERLAP ( HOW MANY INCHES OF OVERLAP: _____ INCHES)	VINYL COVERED STAIRS OR BENCH <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PROVIDE ACCOMPANYING STEP FORM AND DRAW LOCATION ON SHAPE MEASURING FORM.

CUSTOMER TAG NAME:

Blank space for customer tag name.

ORDER INFORMATION

QUOTE #:  
 SO#  
 PO#

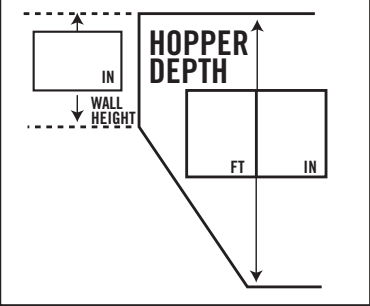
FIBERGLASS STEPS

YES  
 STRAIGHT  RADIUS  
 LOCATION  CENTER SHALLOW END  
 OTHER (DRAW IN LOCATION)

VINYL COVERED STEPS

YES  
 NOTE: STEP MEASURING FORM REQUIRED  
 LOCATION  CENTER SHALLOW END  
 OTHER (DRAW IN LOCATION)

DEPTH MEASUREMENTS



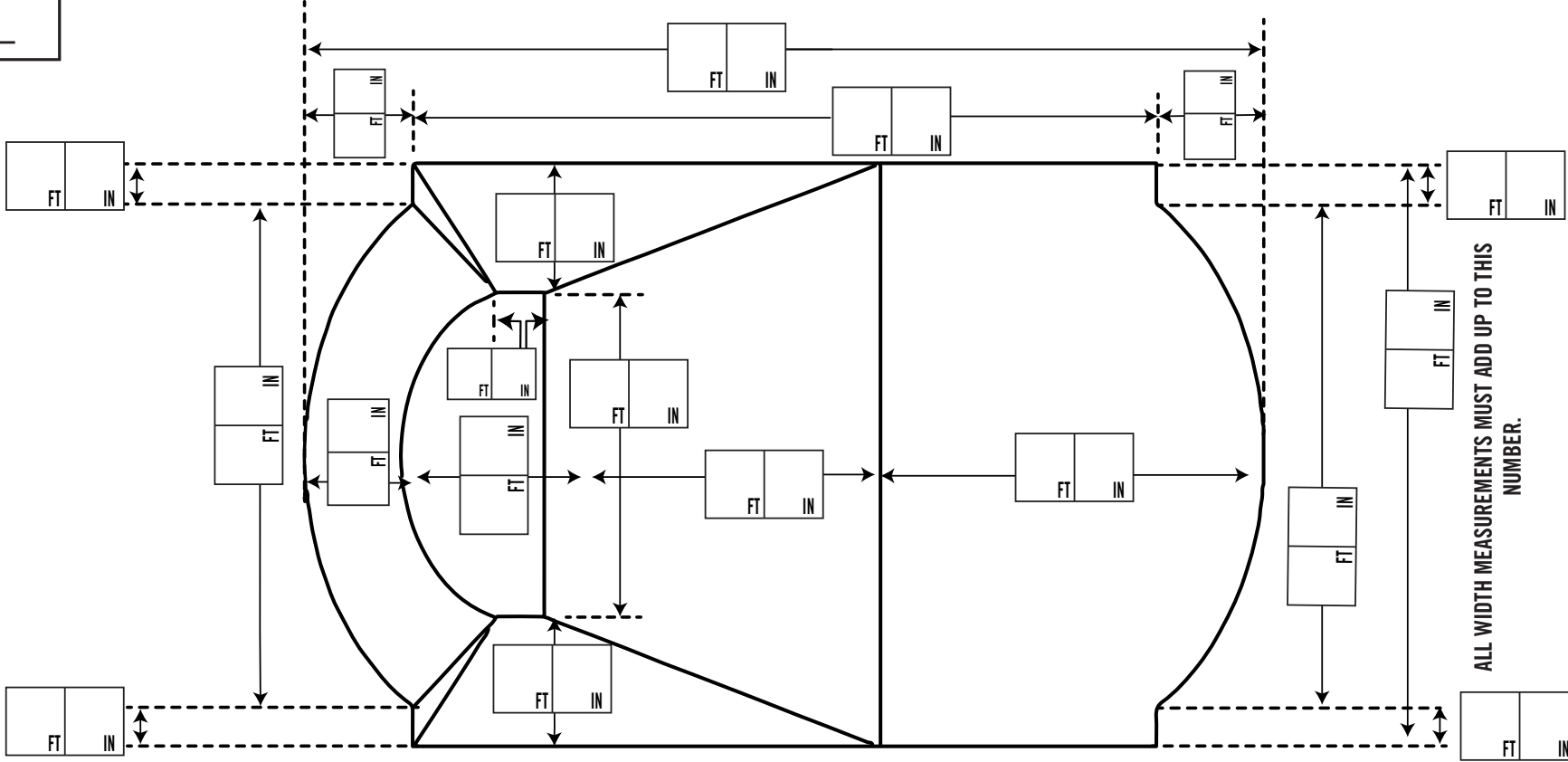
ALL LENGTH MEASUREMENTS MUST ADD UP TO THIS NUMBER.

CORNER SIZE & SHAPE

SQUARE

RADIUS

DIAGONAL



ALL WIDTH MEASUREMENTS MUST ADD UP TO THIS NUMBER.