

BRANCH _____
 P.O. # _____
 SHIPPING ADDRESS BRANCH DEALER
 NAME _____
 STREET _____
 CITY/STATE _____
 PHONE # _____ ZIP _____
 BRANCH E-MAIL _____

DATE _____ DEALER P.O.# _____
 DEALER NAME _____
 STREET _____
 CITY/STATE _____
 PHONE # _____ ZIP _____
 DEALER FAX # _____
 MARK BOX HOMEOWNER _____ QUANTITY ORDERED
 DEALER E-MAIL _____

ONLY COMPLETE LEGIBLE ORDERS CAN BE PROCESSED

SHIPPING INSTRUCTIONS

BRANCH DEALER
 COMMON CARRIER
 VIA _____
 AIR FREIGHT _____ DAY
 OTHER _____

SUPPLEMENTAL FORM MUST BE COMPLETED FOR TRU-TILE LINERS

*** SHOWCASE DEALER: YES NO ***

WALL: 20 MIL
 27 MIL
 38 MIL

BOTTOM: 20 MIL
 27 MIL

VINYL TILE/ WALL PATTERN _____
 BOTTOM _____

WHITE STRIPE BREAKOVER
 YES NO

SURE-FIT BEAD

BEAD _____
 (TYPE) _____
 SEE FORM 11BEADLNR

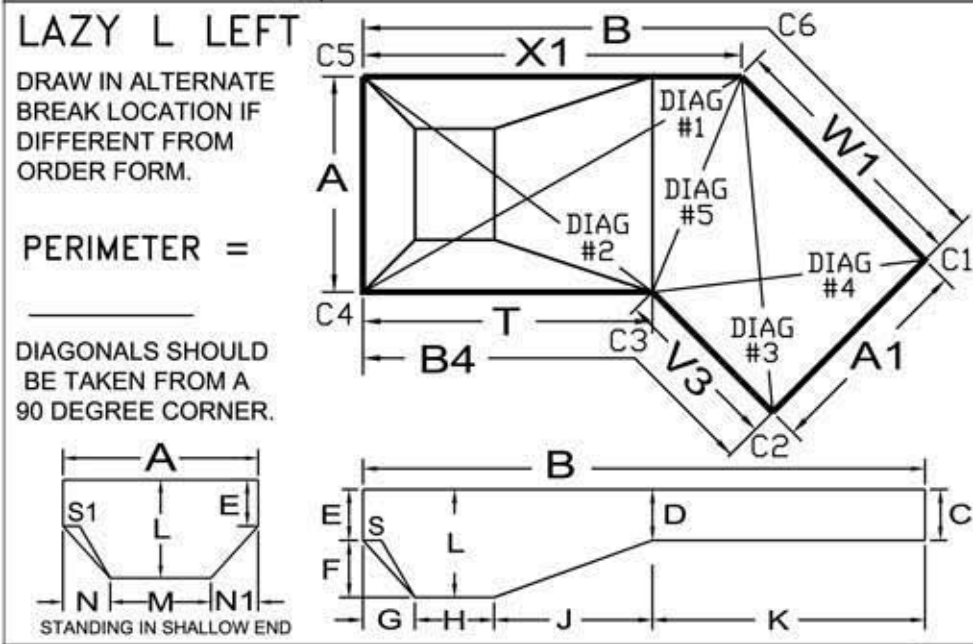
OVERLAP " _____
 (INCHES)

CORNERS _____
 SQUARE
 DIAGONAL " _____
 (INCHES)

RADIUS " _____
 (INCHES)

RADIUS " _____
 (INCHES)

DIMENSIONS	
FEET	INCHES
A	
A1	
B	
B4	
C	
C	
D	
E	
F	
G	
H	
J	
K	
L	
M	
N	
N1	
S	
S1	
T	
V3	
W1	
X1	
DIAG #1	
DIAG #2	
DIAG #3	
DIAG #4	
DIAG #5	



COMMENTS: _____

DRAWING NUMBER: _____

STEP DIMENSIONS	STEPS WILL BE MADE OF BOTTOM MATL. UNLESS SPECIFIED / USE ALT. STEP FORMS FOR NON-RECTANGULAR STEPS
RISERS - INCHES	
R1	
R2	
R3	
R4	
R5	
TREADS - INCHES	
T1	
T2	
T3	
T4	
WIDTHS - INCHES	
W1	
W2	
W3	
W4	
W5	

CORNER 1 SQUARE DIAG. _____" RADIUS _____"

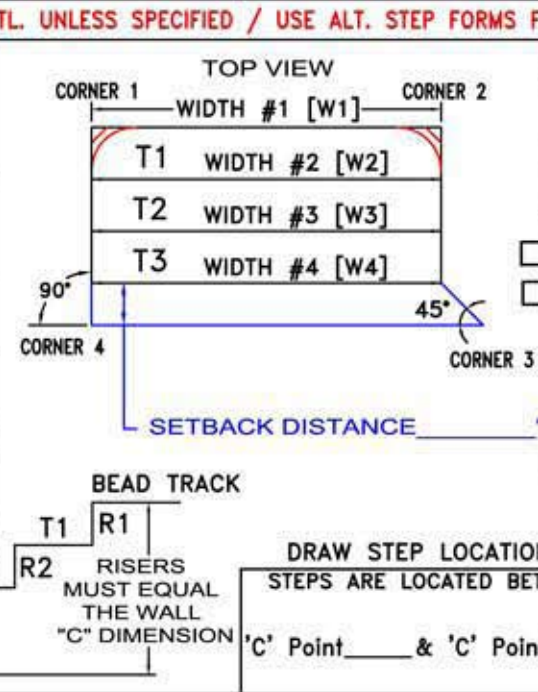
CORNER 2 SQUARE DIAG. _____" RADIUS _____"

CORNER 3 SQUARE DIAG. _____" RADIUS _____"

CORNER 4 SQUARE DIAG. _____" RADIUS _____"

STEP MATERIAL
 BOTTOM MATL.
 TEXTURED WHITE
 TEXTURED BLUE

STEP FASTENER
 ROD POCKETS YES NO
 BEAD YES NO
 VELCRO YES NO
 OPTIONAL: TREAD SIDE FASTENER - T1 ONLY YES NO

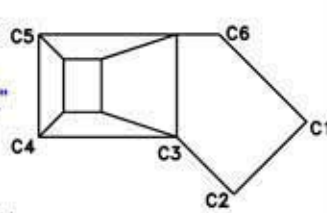


STEP TYPE:
 STEEL-VINYL OVER POLYMER
 RADIUS _____"
 STRAIGHT

STEP LOCATION:
 CENTER OF SHALLOW END
 OTHER (DRAW LOCATION)

DRAW STEP LOCATION

STEPS ARE LOCATED BETWEEN (FOR I-POOL REF.)
 'C' Point _____ & 'C' Point _____"
 _____" From 'C' _____"



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 BRANCH E-MAIL _____

DATE _____ DEALER P.O.# _____
 DEALER NAME _____
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 VIA _____
 AIR FREIGHT _____ DAY
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 27 MIL
 38 MIL

VINYL TILE/ WALL PATTERN _____

BOTTOM: 20 MIL
 27 MIL

BOTTOM _____

WHITE STRIPE BREAKOVER YES NO

SURE-FIT BEAD

BEAD _____ (TYPE) SEE FORM 11BEADLNR

OVERLAP " _____ (INCHES)

CORNERS SQUARE DIAGONAL " _____ (INCHES)

RADIUS " _____ (INCHES)

RADIUS " _____ (INCHES)

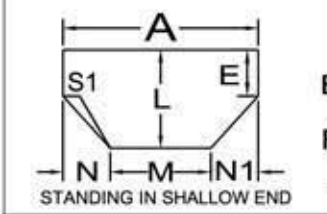
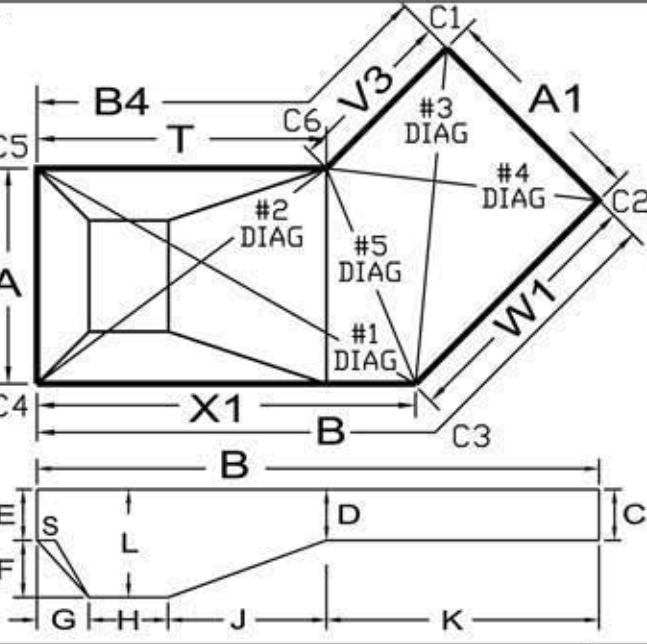
DIMENSIONS FEET INCHES	
A	
A1	
B	
B4	
C	
C	
D	
E	
F	
G	
H	
J	
K	
L	
M	
N	
N1	
S	
S1	
T	
V3	
W1	
X1	
DIAG #1	
DIAG #2	
DIAG #3	
DIAG #4	
DIAG #5	

LAZY L RIGHT

DRAW IN ALTERNATE BREAK LOCATION IF DIFFERENT FROM ORDER FORM.

PERIMETER = _____

DIAGONALS SHOULD BE TAKEN FROM A 90 DEGREE CORNER.



COMMENTS: _____

DRAWING NUMBER: _____

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RISERS - INCHES	
R1	
R2	
R3	
R4	
R5	
TREADS - INCHES	
T1	
T2	
T3	
T4	
WIDTHS - INCHES	
W1	
W2	
W3	
W4	
W5	

CORNER 1 SQUARE DIAG. " _____" RADIUS " _____"

CORNER 2 SQUARE DIAG. " _____" RADIUS " _____"

CORNER 3 SQUARE DIAG. " _____" RADIUS " _____"

CORNER 4 SQUARE DIAG. " _____" RADIUS " _____"

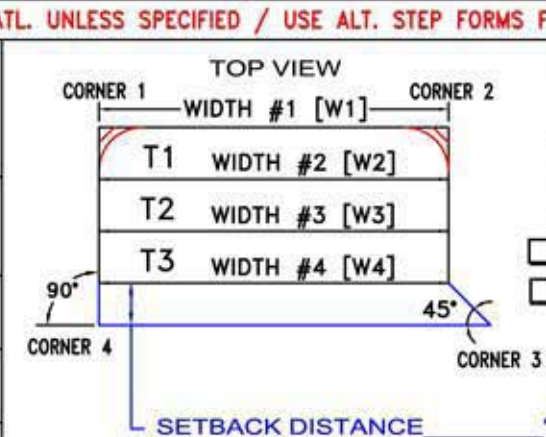
STEP MATERIAL BOTTOM MATL. TEXTURED WHITE TEXTURED BLUE

STEP FASTENER ROD POCKETS YES NO

BEAD YES NO

VELCRO YES NO

OPTIONAL: TREAD SIDE FASTENER - T1 ONLY YES NO



STEP TYPE: STEEL-VINYL OVER POLYMER RADIUS _____ STRAIGHT

STEP LOCATION: CENTER OF SHALLOW END OTHER (DRAW LOCATION)

