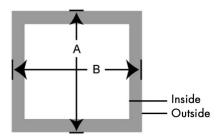
Measurements





| MEASURMENTS THAT ARE REQUIRED: | | |
|--|---------------|--|
| Length (mm)* Width (mm)* Height of Lip (mm)* | (A) | |
| | (B) | |
| | | |
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| | | |
| Comments: | | |
| | - | |
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| - | | |
| AA-l- 0 AA-l-l - [C :[l | | |
| Make & Model of Spa if known COLOUR | | |
| | Diversity | |
| Green Grey | Blue Burgandy | |
| Slate Grey Beige | Tan | |
| | | |
| CONTACT DETAILS: | | |
| Name* | | |
| Address* | | |
| | | |
| Phone Number* | | |
| Date | | |
| Email address* | | |

* Required fields before sending this form.

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