

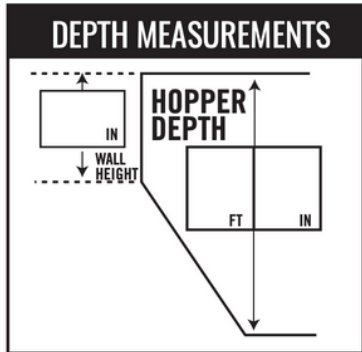
Name _____

Date _____



RECTANGLE STANDARD HOPPER

CUSTOMER NAME	FIBERGLASS STEPS	VINYL COVERED STEPS
	<input type="checkbox"/> YES --> <input type="checkbox"/> STRAIGHT <input type="checkbox"/> RADIUS	<input type="checkbox"/> YES --> NOTE: STEP MEASURING FORM REQUIRED
CONTACT INFO	LOCATION <input type="checkbox"/> CENTER SHALLOW END <input type="checkbox"/> OTHER (DRAW IN LOCATION)	LOCATION: <input type="checkbox"/> CENTER SHALLOW END <input type="checkbox"/> OTHER (DRAW IN LOCATION)
PHONE:		
ORDER NO.:		



HOPPER PAD CORNERS

SQUARE

RADIUS _____ IN.

