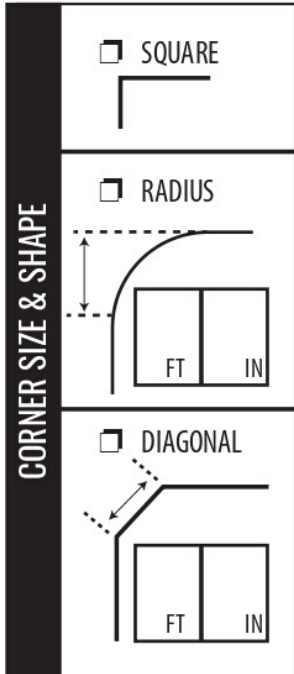
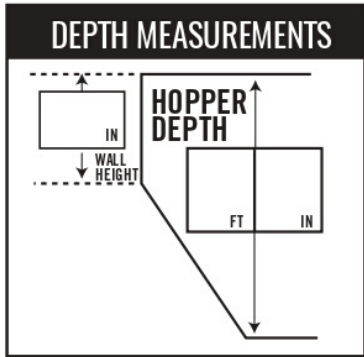


Name _____ Date _____

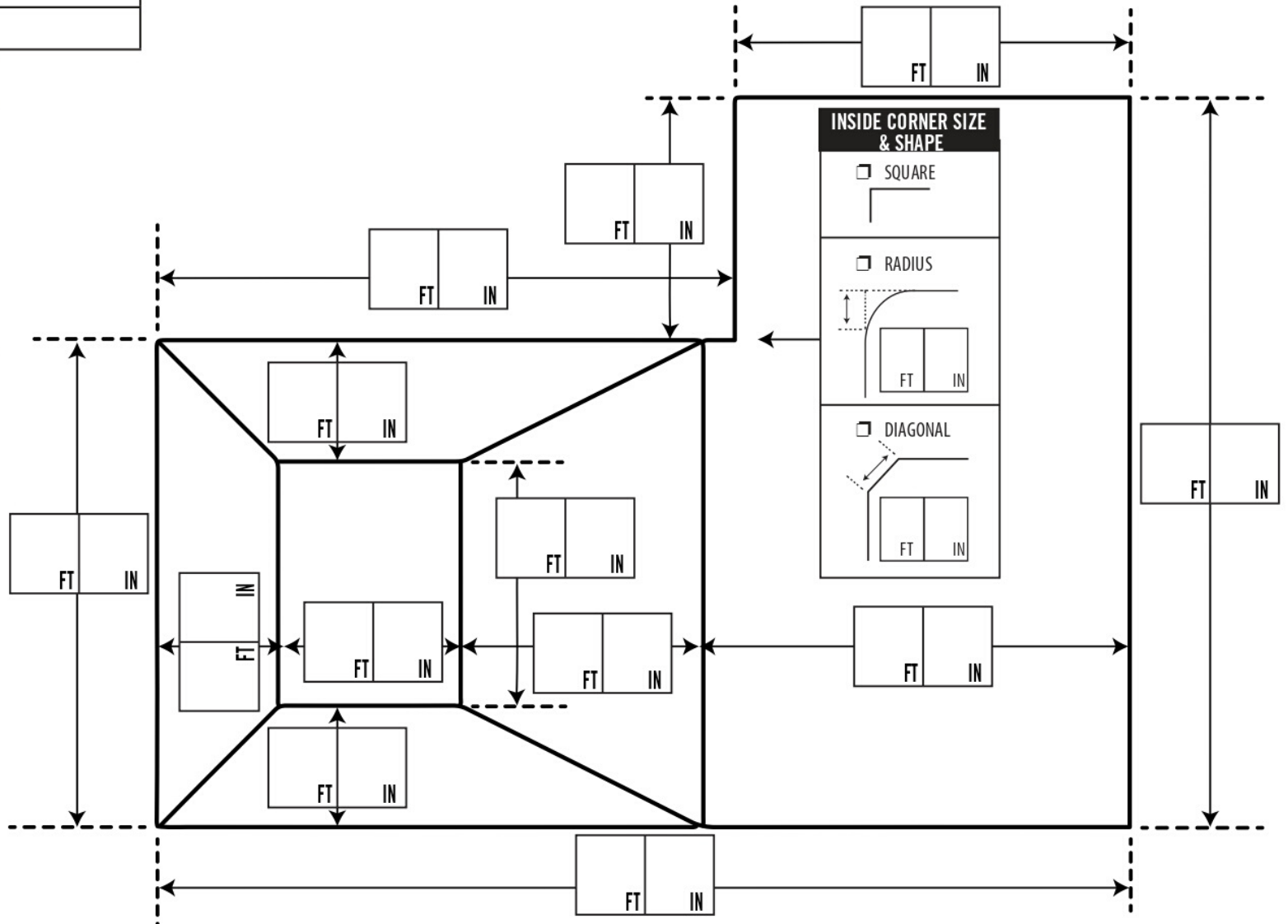
CUSTOMER NAME
CONTACT INFO
PHONE: _____
EMAIL: _____

FIBERGLASS STEPS	
<input type="checkbox"/> YES -->	<input type="checkbox"/> STRAIGHT <input type="checkbox"/> RADIUS
LOCATION	<input type="checkbox"/> CENTER SHALLOW END <input type="checkbox"/> OTHER (DRAW IN LOCATION)

VINYL COVERED STEPS	
<input type="checkbox"/> YES -->	NOTE: STEP MEASURING FORM REQUIRED
LOCATION:	<input type="checkbox"/> CENTER SHALLOW END <input type="checkbox"/> OTHER (DRAW IN LOCATION)



ALL WIDTH MEASUREMENTS MUST ADD UP TO THIS NUMBER.



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ALL LENGTH MEASUREMENTS MUST ADD UP TO THIS NUMBER.