

Liner Order Form

Name: _____

Date: _____

Delivery Address: _____

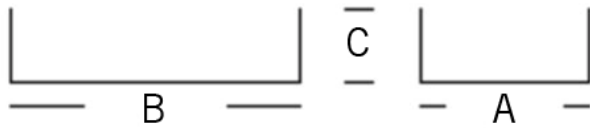
Tel: _____

Fax: _____

LINER ORDER
FAX TO 01747 839609
OR EMAIL TO
WIKKI@1ST-DIRECT.COM

Please indicate the required pool by ticking the appropriate box and fill in the necessary measurements.

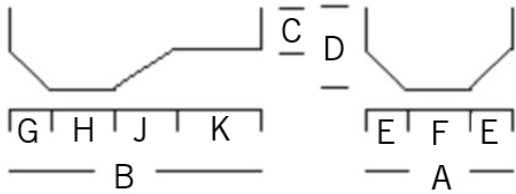
Flat Bottom



Dimensions:

A:		F:	
B:		G:	
C:		H:	
D:		J:	
E:		K:	

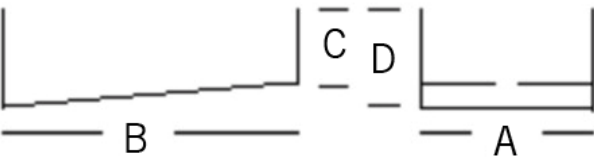
Hopper



Liner Material & Thickness:

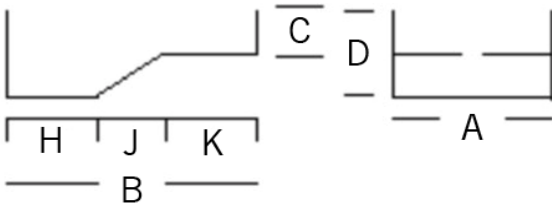
Colour / Pattern: _____ Thickness: _____

Constant Slope



Base:		
Sidewall:		
Tile-band:		

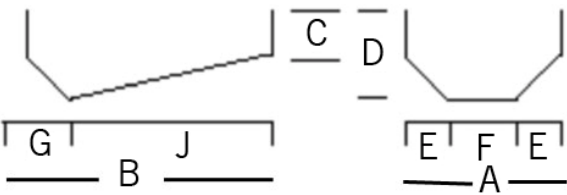
Special Slope



Floor to Wall Corners:

Radius: _____
 Square: _____

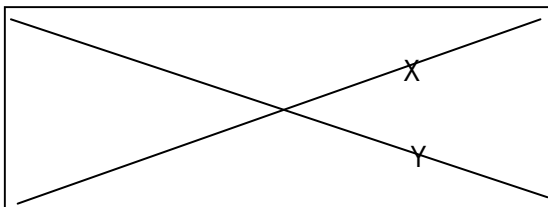
Wedge



Wall to Wall Corners:

Radius: _____
 Square: _____

Diagonals



Fixing: _____

Diagonal Measurements:

X: _____
 Y: _____

Special Instructions:



Linings & Accessories

