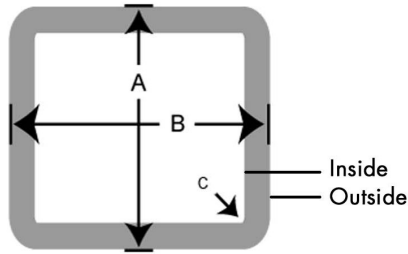


# Measurements



## MEASUREMENTS THAT ARE REQUIRED:

Length (mm)*	<input type="text" value="(A)"/>
Width (mm)*	<input type="text" value="(B)"/>
Height of Lip (mm)*	<input type="text"/>
Radius of rounded Corners (mm)*	<input type="text" value="(C)"/>

Comments:

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Make & Model of Spa if known

### COLOUR

<input type="checkbox"/> Green	<input type="checkbox"/> Grey	<input type="checkbox"/> Blue	<input type="checkbox"/> Burgandy
<input type="checkbox"/> Slate Grey	<input type="checkbox"/> Beige	<input type="checkbox"/> Tan	

## CONTACT DETAILS:

Name*	<input type="text"/>
Address*	<input type="text"/>
Phone Number*	<input type="text"/>
Date	<input type="text"/>
Email address*	<input type="text"/>

\* Required fields before sending this form.

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