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 YORK, PA 17406  
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Liner Order Form **GREC.LAZY-L w/RECT.HOP. RIGHT**

Date:	P.O.#	Fabrication: <input type="checkbox"/> Quotation: <input type="checkbox"/>
Company:		
Zip Code:		
Job Name:		
Wall Pattern:	<input type="checkbox"/> 20 Mil	<input type="checkbox"/> 28 Mil
Bottom Pattern:	<input type="checkbox"/> 20 Mil	<input type="checkbox"/> 28 Mil

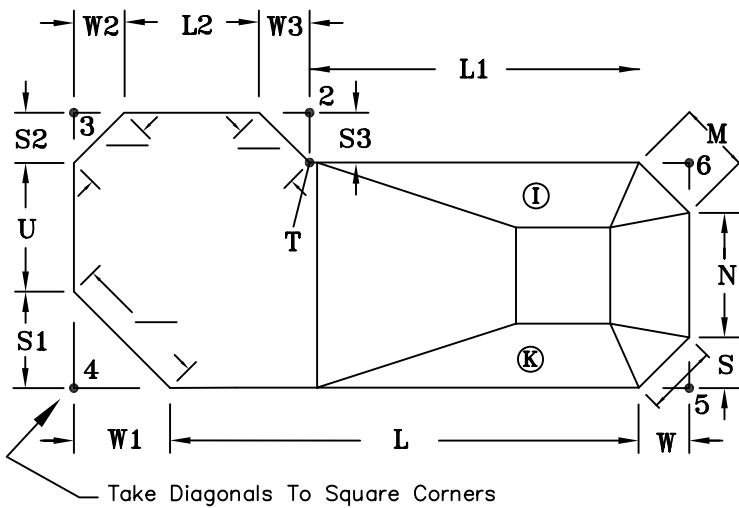
Beaded:  Overlap:  Safety Ledge:  Yes  No Width: \_\_\_\_\_ Brand Of Pool: \_\_\_\_\_

WALL SEAM LOCATION REQUEST  No  Yes

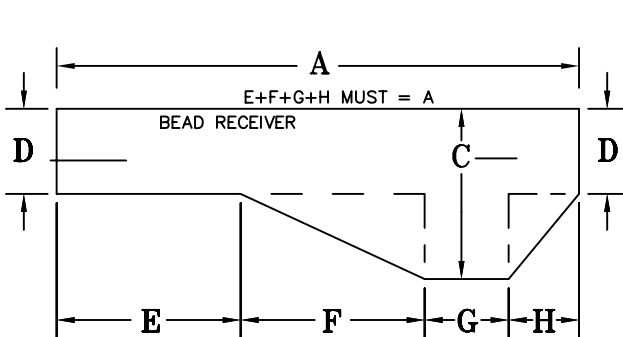
Must Be Shown And Dimensioned. Pen Fab Not Responsible For Pattern Misalignment

Note: If The Pool Has Stairs, Indicate Location From The Corners. If The Liner Covers The Stairs, Use Separate Stair Sheet For Required Stair Information.

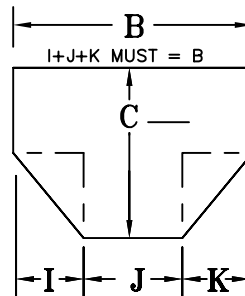
All Measurements Must Be Taken From The BEAD RECEIVER groove to the finished bottom



L \_\_\_\_\_ L1 \_\_\_\_\_ L2 \_\_\_\_\_ M \_\_\_\_\_  
 N \_\_\_\_\_ S \_\_\_\_\_ S1 \_\_\_\_\_ S2 \_\_\_\_\_  
 S3 \_\_\_\_\_ W \_\_\_\_\_ W1 \_\_\_\_\_ W2 \_\_\_\_\_  
 W3 \_\_\_\_\_ U \_\_\_\_\_  
 Right From Deep End  
 2 to T \_\_\_\_\_ 2 to 3 \_\_\_\_\_ 2 to 4 \_\_\_\_\_  
 3 to 4 \_\_\_\_\_ 3 to 5 \_\_\_\_\_ 4 to 5 \_\_\_\_\_  
 4 to 6 \_\_\_\_\_ 5 to 6 \_\_\_\_\_ 6 to T \_\_\_\_\_



From Deep End of Pool



A \_\_\_\_\_ E \_\_\_\_\_ I \_\_\_\_\_  
 B \_\_\_\_\_ F \_\_\_\_\_ J \_\_\_\_\_  
 C \_\_\_\_\_ G \_\_\_\_\_ K \_\_\_\_\_  
 D \_\_\_\_\_ H \_\_\_\_\_  
 Pool Perimeter \_\_\_\_\_

Notes: