



SAFETY COVERS

Spa Cover Order Form

Dealer Name or Stamp: _____
 City: _____
 Phone: (____) _____
 PO# _____
 Salesperson: _____

Spa Owner: _____
 Address: _____
 City: _____
 Home Phone: (____) _____
 Business Phone: (____) _____

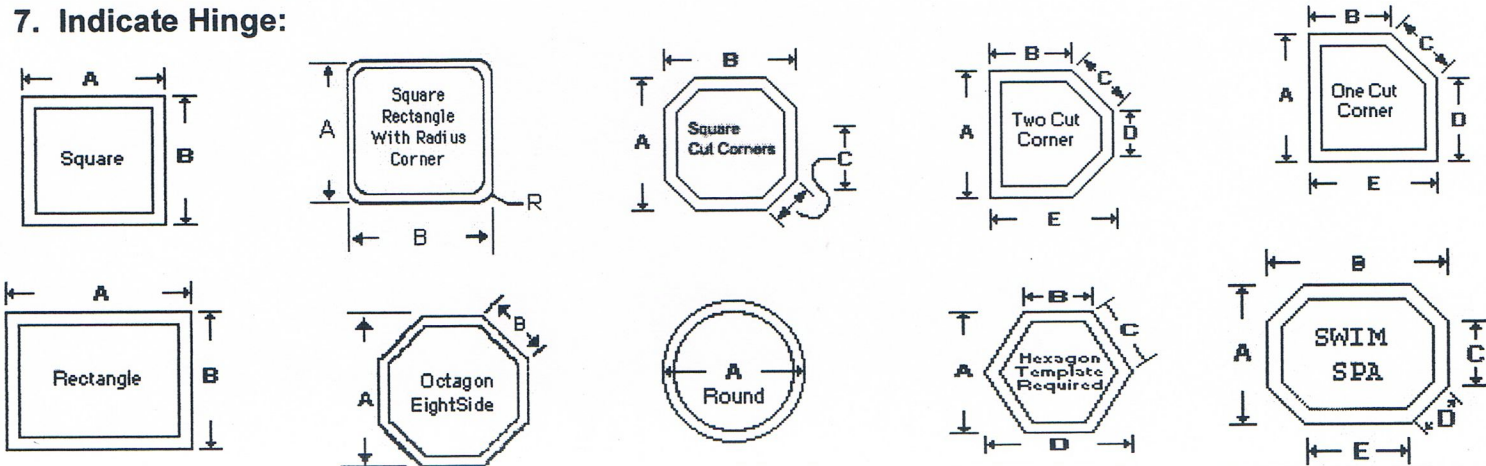
1. **Series** (Please Circle): Heat Shield Venus
2. **Color:** Russet Beige Grey Light Blue Teal Navy Forest Green Other (extra charge) _____
3. **Foam Density:** 1LB Standard or 2LB (extra charge)
4. **Skirt / Flap Length:** None, 2 1/2", 3", 3 1/2", 4" or Other: _____ (measure from bottom of cover)
5. **Safety Locking Tie Downs:** 8 1/2" Straps Standard or Other: _____ (measure from bottom of cover)

Spa Manufacturer (if known): _____ Spa Model: _____ Year (if known): _____

Special Instructions: (ie) Tie Down Length, Tie Down Locations, Hinge Direction (Be Specific) _____

6. Circle Spa Shape:

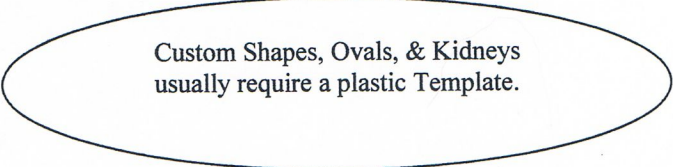
7. Indicate Hinge:



Please Provide Cover Size in "inches only."

Measure to the outside edges of the spa lip.

8. Side A: _____"
 Side B: _____"
 Side C: _____"
 Side D: _____"
 Side E: _____"



9. Radius Corners _____"

OR

Cut Corners: _____"

Agreement:

- ✓ Spa Covers are custom manufactured to your Specifications.
- ✓ Spa owner assumes responsibility for cover size specifications provided above.
- ✓ **ABSOLUTELY NO RETURNS!**
- ✓ Safety Covers require at least 4 Tie Downs!

Spa Owner Signature: _____