



ACRYLIC WALL LINER - CUSTOM ORDER FORM

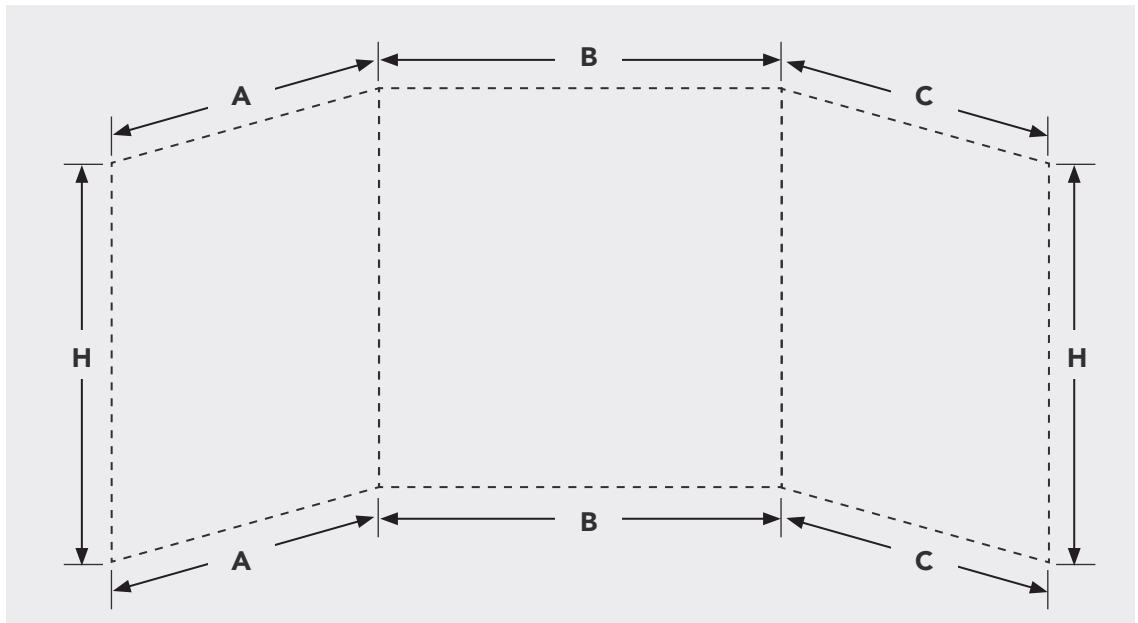
ACCOUNT NAME: _____

DELIVERY TO: _____

ORDER NUMBER: _____

ORDERED BY: _____ **DATE:** _____

PHONE: _____ **FAX:** _____



Please complete the following information below to order your custom wall liner:

WALL OPTION: Flat Moulded *Please note moulded shelves are positioned on the longest side.

Refer to the diagram above for measurement information.

WALL TYPE: Alcove (3 Sided) Wall Liner 2 Sided Wall Liner

A = mm A = mm
 B = mm B = mm
 C = mm H = mm
 H = mm

SIGNED BY: _____ **SIGNATURE:** _____ **DATE:** _____

PLEASE NOTE THAT ALL CUSTOM WALL LINERS ARE NON-RETURNABLE AND NON-REFUNDABLE. A 50% NON-REFUNDABLE DEPOSIT IS REQUIRED FOR ALL NON-STANDARD ORDERS BEFORE THE ORDER IS PROCESSED.

PLEASE TAKE COMPLETED FORM TO YOUR LOCAL MERCHANT