RANDED MANUFACTURIN R A N D E D M F G . C O

LASER MEASURE REOU

PLEASE SEND COMPLETED FORM TO SALES@BRANDEDMFG.COM

DATE OF REQUEST:

B

REQUESTED MEASURE DATE: ____ VERSION: 10-16-2022

COMPANY:
SALESMAN NAME:
SALESMAN PHONE:
CUSTOMER/JOB NAME:
CUSTOMER/JOB PHONE:
CUSTOMER/JOB ADDRESS:
(KEYPAD/ETC)

LINER	COVER
 POOL DRAINED? (DATE) LINER REMOVED? (DATE) AUTO-PUMP LEFT IN HOPPER?* (DATE) 	EXISTING COVER ON POOL? (DATE)
DISTANCE FROM BRANDED MFG 805 INDUSTRIAL PARK DRIVE TRENTON, TN 38382 TO JOBSITE:	COMPANY REPRESENTATIVE (& PHONE NUMBER) MEETING THE LASER MEASURING CREW ON-SITE:
	*PLEASE LEAVE AUTO-PUMP UNTIL COMPLETION
WILL BE INVOICED WITH PRODUCT.	OF MEASURING. BRANDED MFG IS NOT RESPONSI- BLE FOR PUMPING WATER.