

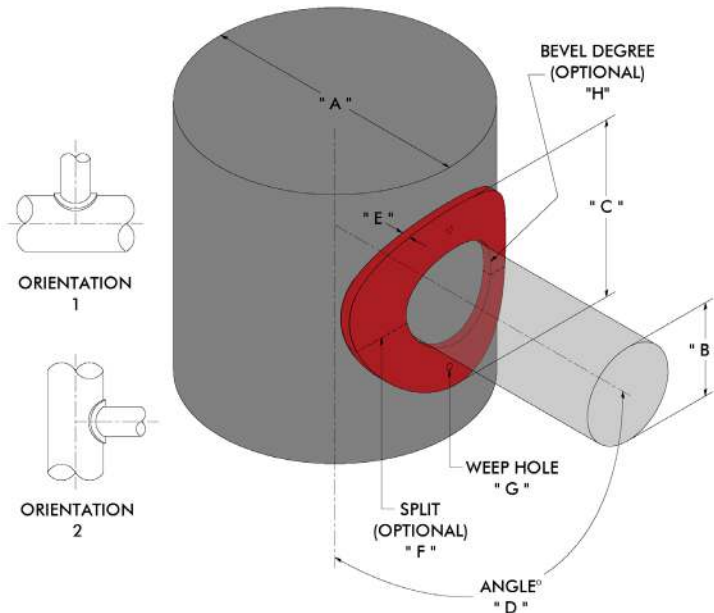


REINFORCEMENT PAD ORDER FORM

Customer Information:

Company Name: _____ Address: _____
City/State/Zip: _____ Website: _____
Contact Name: _____ Phone: _____
E-mail: _____ Date: _____

To receive a quote, please provide the details requested below utilizing the diagram:



Orientation (1/2): _____

A: Main Pipe Outside Diameter (in) _____

B: Branch Outside Diameter (in) _____

C: RePad Outside Diameter (in) _____

D: Branch To Main Line Angle: _____

E: RePad Thickness (in): _____

F: Split RePad: (Optional,Y/N): _____

G: Weep Hole Diameter (in): _____

- Weep Hole (Optional,Y/N): _____

H: Beveled: (Optional, Y/N): _____

- Bevel Degree: _____

Quantity: _____

Material Type: _____

Additional Requirements, Project Lead Time:
