

Deckmount & Manual



Order Form

Fax (317) 579-2006

Distributor _____ PO # _____

Pool Dealer _____
Address _____
City/St/Zip _____
Fax # _____

Home Owner _____
Address _____
City/St/Zip _____
Phone # _____

SECTION 1

Drive System **AutoGuard™** ManualGuard
Vinyl Bench Yes- complete order form Frame Only None

Pool Size _____ X _____ (including end steps)

Track Space _____ ft _____ in X _____ ft
width length Unit Set Back _____ inches
(Standard is 12" Maximum is 24")

Motor Side Left Right
* Standing behind the recessed box looking at pool

SECTION 2

Fabric Color Light Blue Royal Blue Navy Blue Beige Green Light Gray Charcoal Gray
* Fabric manufactured with 6 to 7 inches of slack. If other measurement required, please note.

Add Material UL System Ladder Hinges 2nd Keyswitch

SECTION 3

Ship To Distributor Dealer Hold @ Dock Pick-up @ APC Other _____
Bill Ship To Distributor - collect or 3rd party Dealer - collect
 Distributor - prepay and add Dealer - prepay and add Requested Ship Date _____
Freight Co. No Preference Estes Standard Forwarding
 FedEx Freight UPS Freight Other _____

The undersigned hereby orders the above materials from Automatic Pool Covers, Inc. Automatic Pool Covers, Inc. agrees to manufacture products to the above specifications.
By signing this order, the purchaser agrees to Automatic Pool Covers' Terms & Conditions.

Purchaser's Signature _____

Date _____