

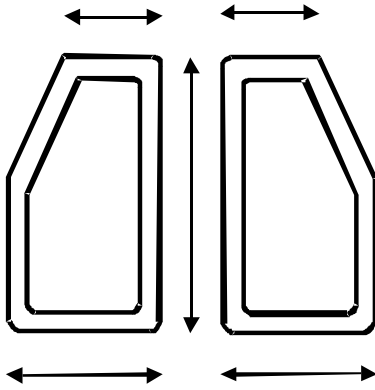


Company Reg. No. 2376783

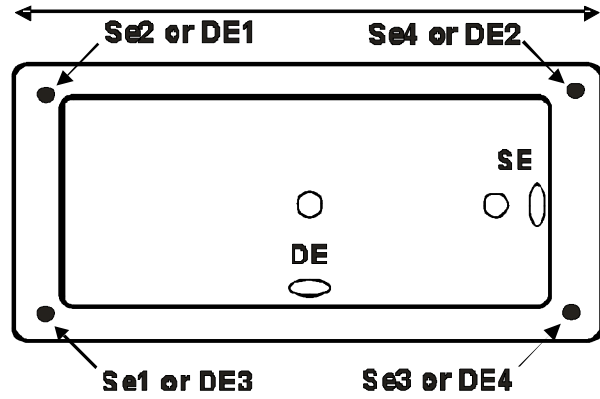
# Shower & Bath Check List

Branch \_\_\_\_\_

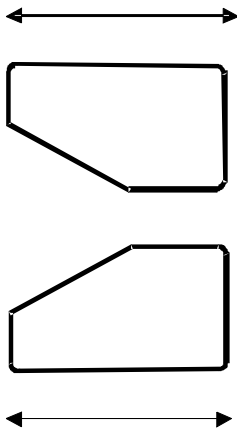
Sales Order No. \_\_\_\_\_



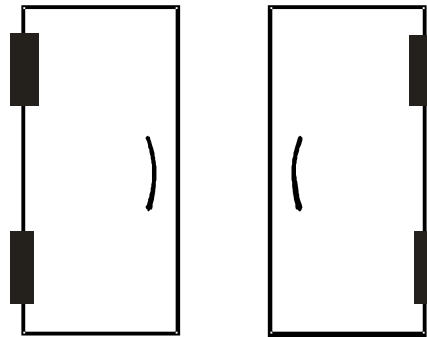
Please indicate "Hand" of your Bath



Please indicate **Drilling Position** in relation to Waste & Overflow



Please indicate "Hand" of your Shower Tray



Please indicate the "Hand" of your Door / Screen

Your Door / Return Panel adjustment is:-  
DOOR ..... to .....  
PANEL ..... to .....

**Remember:- Bespoke items & Specials cannot be returned;** please indicate below any items not covered above

You must ensure all walls are straight and vertical before measurements are taken.

Affix separate sheet if necessary

Customer Signature: .....

Sales Consultant Signature: .....