

Date

Customer

Telephone

Fax

Email

Contact Name

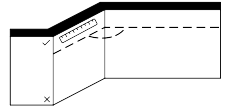


Bay Checker

Bays can also be measured using our bay checker app
Scan here or search for bay checker in iTunes & Google Play

Directions for measuring a bay

- 1 Use a metal tape measure & our angle calculator
- 2 Measure the wall at the height the pole will be fitted.
- 3 Measure wall dimensions not pole dimensions.



1 Collection & Diameter

Steel <input type="checkbox"/> 19mm (3/4") <input type="checkbox"/> 25mm (1") <input type="checkbox"/> 38mm (1 1/2") <input type="checkbox"/> 50mm (2")	Gliderpole <input type="checkbox"/> Flat H36mm (1 7/16") - Hand Drawn <input type="checkbox"/> Round 30mm (1 3/16") - Hand Drawn <input type="checkbox"/> Round 30mm (1 3/16") - Corded <input type="checkbox"/> Round 50mm (2") - Hand Drawn <input type="checkbox"/> Round 50mm (2") - Corded	Eclipse <input type="checkbox"/> 30mm (1 3/16") <input type="checkbox"/> 38mm (1 1/2") <input type="checkbox"/> 50mm (2")	Stainless <input type="checkbox"/> 19mm (3/4") <input type="checkbox"/> 25mm (1") <input type="checkbox"/> 38mm (1 1/2") <input type="checkbox"/> 50mm (2")	Simple <input type="checkbox"/> 19mm (3/4") <input type="checkbox"/> 25mm (1") <input type="checkbox"/> 30mm (1 3/16") <input type="checkbox"/> 38mm (1 1/2") <input type="checkbox"/> 50mm (2")	Elysian <input type="checkbox"/> 30mm (1 3/16") <input type="checkbox"/> 50mm (2") Baroco <input type="checkbox"/> 50mm (2")
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2 Bay Type & Measurement Please pick the bay type and complete the corresponding measurements

<input type="checkbox"/> One Bend Bay 	Wall Measurements <input type="text"/> A-B <input type="text"/> B-C	Angle <input type="text"/> B	Optional cross measurement <input type="text"/> A-D Optional distances for return bends <small>See specification guide for min. wall space required</small> <table border="0"> <tr> <td>wall measurements</td> <td>Angles</td> </tr> <tr> <td><input type="text"/> 1-A</td> <td><input type="text"/> A</td> </tr> <tr> <td><input type="text"/> 2-D</td> <td><input type="text"/> D</td> </tr> </table>	wall measurements	Angles	<input type="text"/> 1-A	<input type="text"/> A	<input type="text"/> 2-D	<input type="text"/> D
wall measurements	Angles								
<input type="text"/> 1-A	<input type="text"/> A								
<input type="text"/> 2-D	<input type="text"/> D								
<input type="checkbox"/> Two Bend Bay 	Wall Measurements <input type="text"/> A-B <input type="text"/> B-C <input type="text"/> C-D	Angles <input type="text"/> B <input type="text"/> C							
<input type="checkbox"/> Square Bay 	Wall Measurements <input type="text"/> A-B <input type="text"/> B-C <input type="text"/> C-D <input type="text"/> D-E <input type="text"/> E-F	Angles <input type="text"/> B <input type="text"/> C <input type="text"/> D <input type="text"/> E							
<input type="checkbox"/> Four Bend Bay 	Wall Measurements <input type="text"/> A-B <input type="text"/> B-C <input type="text"/> C-D <input type="text"/> D-E <input type="text"/> E-F	Angles <input type="text"/> B <input type="text"/> C <input type="text"/> D <input type="text"/> E	Optional cross measurement <input type="text"/> A-F Optional distances for return bends <small>See specification guide for min. wall space required</small> <table border="0"> <tr> <td>wall measurements</td> <td>Angles</td> </tr> <tr> <td><input type="text"/> 1-A</td> <td><input type="text"/> A</td> </tr> <tr> <td><input type="text"/> 2-F</td> <td><input type="text"/> F</td> </tr> </table>	wall measurements	Angles	<input type="text"/> 1-A	<input type="text"/> A	<input type="text"/> 2-F	<input type="text"/> F
wall measurements	Angles								
<input type="text"/> 1-A	<input type="text"/> A								
<input type="text"/> 2-F	<input type="text"/> F								

3 Final Location

Please confirm where you would like your finials

<input type="checkbox"/> 1 Outside point A 	<input type="checkbox"/> 2 Inside point A 	<input type="checkbox"/> 3 Distance from point A 	If option 3, please specify distance from point A <input type="text"/>	Ceiling Mounted? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify projection from wall <input type="text"/>	Double Pole <input type="checkbox"/> Yes <input type="checkbox"/> No
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4 Order Declaration please ensure all sections are complete and note that errors made on this form could mean your bay system will not fit correctly. bay systems cannot be exchanged, replaced or refunded. I confirm the given measurements are correct and on this basis wish to proceed with an ORDER

Signed

Date