



Oasis Hot Tub Service
 P.O. Box 33004
 Northglenn, CO 80233

Order Date: _____

Customer Name: _____

Address: _____

Phone/e-mail: _____

oasishottub@gmail.com

720-425-5484

oasisht.com

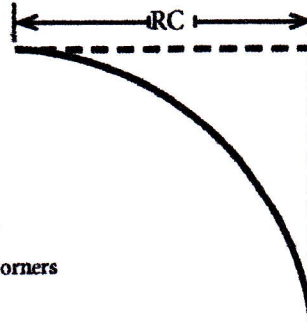
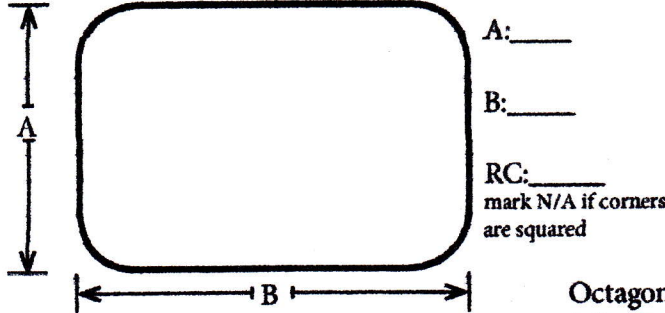
Spa Cover Information and Measurements (Please mark all measurement in inches)

Make (Optional): _____ Model (Optional): _____

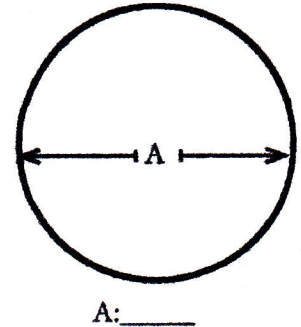
Year (Optional): _____

ATTN: PLEASE MARK HINGE DIRECTION IF CRITICAL

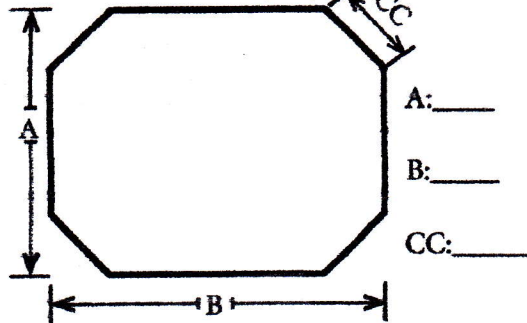
Rectangle or Square with Rounded Corners (RC)



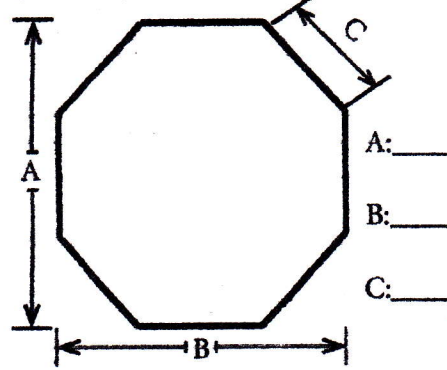
Round



Rectangle or Square with Rounded Corners (RC)



Octagon (all sides are the same)



Full Heat Seal (Add \$50.00)	<input type="checkbox"/> YES
	<input type="checkbox"/> NO
Hinge Handles (Add \$20.00)	<input type="checkbox"/> YES
	<input type="checkbox"/> NO
FASTENERS	
<input type="checkbox"/> Side Release	
<input type="checkbox"/> Center Release (Add \$20.00)	

Style (Foam Density)	SKIRT LENGTH	COLORS	FASTENERS
<input type="radio"/> Basic (1.0 lb)	<input type="checkbox"/> 1" <input type="checkbox"/> 2.5" <input type="checkbox"/> 4"	<input type="radio"/> Adobe <input type="radio"/> Almond <input type="radio"/> Gold <input type="radio"/> Spice	Length: _____
<input type="radio"/> 4/2 Standard (1.5 lb)	<input type="checkbox"/> 1.5" <input type="checkbox"/> 3" <input type="checkbox"/> 4.5"	<input type="radio"/> Rust <input type="radio"/> Brown <input type="radio"/> Walnut <input type="radio"/> Light Gray	# of Fasteners: _____
<input type="radio"/> 4/2 High Density (2.0 lb)	<input type="checkbox"/> 2" <input type="checkbox"/> 3.5" <input type="checkbox"/> Other: _____	<input type="radio"/> Ash <input type="radio"/> Steel <input type="radio"/> Charcoal <input type="radio"/> Black	
<input type="radio"/> 5/3 Super (2.0 lb)		<input type="radio"/> Sky <input type="radio"/> Ocean <input type="radio"/> Green	
<input type="radio"/> 6/4 Mega (2.0 lb)			

Spa cover specifications above were provided by: Dealer Spa Owner

Spa owner assumes responsibility for cover specifications above. Allow approximately 3 weeks from date ordered.

Amount: \$ _____

Tax: \$ _____

Total: \$ _____

Balance Due: \$ _____

Signature: _____ Date: _____

I acknowledge receipt of my Elite Spa Cover per the specifications above. I have determined the cover and find it is in acceptable condition. Any damage I cause to the cover as a result of transporting is my responsibility.

Spa Owners Signature: _____ Date: _____