

ULTRAFLOTE COVER INQUIRY DATA SHEET

Date: (mo/yr)

Customer (Buyer):

Contact: Telephone #: Fax #:

Address:

TANK DATA

(Fill in the information below)

of Covers:

Tank Number(s):

Location of Tank:

Tank Size:

Diameter:

Height:

Products:

Specific Gravity:

Fill Rate:

Empty Rate:

of Columns:

ACCESSORIES

(Check the appropriate box)

<input type="checkbox"/> Roof Type:(select one)	<input type="checkbox"/> Alum	<input type="checkbox"/> Hybrid	<input type="checkbox"/> Stainless Steel	<input type="checkbox"/> Seal Type:(select one)	<input type="checkbox"/> Single	<input type="checkbox"/> Double		
<input type="checkbox"/> Type Legs:(select one)	<input type="checkbox"/> Fixed	<input type="checkbox"/> Adjustable		<input type="checkbox"/> Stainless Steel ULTRASHOE Seal				
<input type="checkbox"/> Leg Materials:	<input type="checkbox"/> Alum	<input type="checkbox"/> Stl	<input type="checkbox"/> Galv	<input type="checkbox"/> S.S.	<input type="checkbox"/> 1" Drains All Over	<input type="checkbox"/> 2" Drains All Over		
<input type="checkbox"/> Swivel Feet					<input type="checkbox"/> Gauge Pipe:	<input type="checkbox"/> Alum	<input type="checkbox"/> Steel	<input type="text"/> "Dia.
<input type="checkbox"/> Cable Suspended Cover					<input type="checkbox"/> Sample Pipe:	<input type="checkbox"/> Alum	<input type="checkbox"/> Steel	<input type="text"/> "Dia.
<input type="checkbox"/> Type Roof Vents:	<input type="checkbox"/> Peripheral	<input type="checkbox"/> Center	<input type="checkbox"/> Overflow	<input type="checkbox"/> Tank Ladder:	<input type="checkbox"/> Alum	<input type="checkbox"/> Stl Chan	<input type="text"/> "Dia.	
<input type="checkbox"/> A-R Cables				<input type="checkbox"/> Combo Ladder Pipe:	<input type="checkbox"/> Alum	<input type="checkbox"/> Steel	<input type="text"/> "Dia.	
<input type="checkbox"/> 24" Square Access Hatch	<input type="checkbox"/> 32" Square Access Hatch			<input type="checkbox"/> Roof Ground Cables		<input type="checkbox"/> Shunts		
<input type="checkbox"/> Vacuum Breakers	<input type="checkbox"/> Combo AH/VH/SW			<input type="checkbox"/> Other Accessories:	<input type="text"/>			
<input type="checkbox"/> Sample Wells					<input type="text"/>			
<input type="checkbox"/> 24" Float Well	<input type="checkbox"/> 32" Float Well	<input type="checkbox"/> with Cages			<input type="text"/>			
<input type="checkbox"/> 24" x 40" Ladder Well	<input type="checkbox"/> 24" x 32" Ladder Well				<input type="text"/>			
<input type="checkbox"/> 24" Gauge Pipe Well	<input type="checkbox"/> 32" Gauge Pipe Well				<input type="text"/>			

Timing of Order : / (mo/yr)

Timing of Shipment: / (mo/yr)

Comments: