

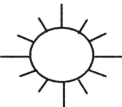
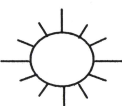
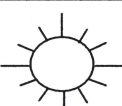
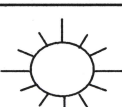
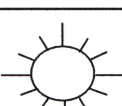
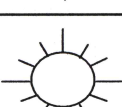
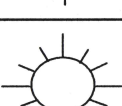
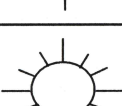
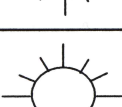
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Customer _____ Date _____

Job Name _____ Phone _____

Job Location _____
 (City)

Structure #	Elevation	MH Dia.	Openings, Location, Pipe Size & Type	Amount to deduct for casting	*Special Instruction* (i.e.. Sump depth, weep holes, gaskets)
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				
	RIM				
	INVERT				