

Please FAX or E-mail this form to:

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Custom Fabrication Worksheet

All Dimensions indicated must be (**O.D.**) Note any special Lid requirements and Height measurements. Please Check OpenTop Closed Top Width Please indicate FITTING SIZE (s) Note locations on drawing... TANK DIMENSIONS Length_____Tank Lip Dimensions Width______Wide_____ Height_____Lip Option #B_____ ___ Wide _____ Lip Option (A)
Straight Lip
Lip Option (B)
Lip Over/Down Solution____ Material Solution Level from Tank Lip **COMPANY INFORMATION** Contact Name_____ Company_____ _____Shipping Address_____ Address____ City, State, Zip