



DURASKIRT™ Pre-Order Form
 Sales@MHSandS.com
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 DURASKIRT.com

Date	Name & Billing Address	Phone #
PO#		Ordered By (name):

Job Name	Delivery Address

Check the items below that apply.	Fill in the Dates Below
<input type="checkbox"/> SMOOTH <input type="checkbox"/> *Access Well & Lid <input type="checkbox"/> PRO30G <input type="checkbox"/> *Access Door <input type="checkbox"/> PRO37G <input type="checkbox"/> *Hand Access Flood Set? Yes <input type="checkbox"/> No <input type="checkbox"/>	Home Delivered by: _____ Set & Ready to Measure by: _____ Approx' Installation Day: _____

Draw the home with dimensions and show the crawlspace *access(es) location(s).

Special Instructions or directions.	Warranty Information
	Dealership _____ Manufacturer _____ Serial # _____