

WEST COAST INNOVATIVE PRO-PADS™

How to Order

- Call us Toll-Free at **1-800-422-9737** or 626-794-9330
- Fax Completed Order Form to **1-800-732-2746**
- Email Completed Order Form to: **orders@ipropads.com**
- Order Online at **www.ipropads.com**

Company Name: _____ Customer #: _____ Date: _____
 Contact Name: _____ Phone: _____
 Address: _____ Fax: _____
 City / State / Zip: _____
 Email: _____

QUOTE ONLY **ORDER**

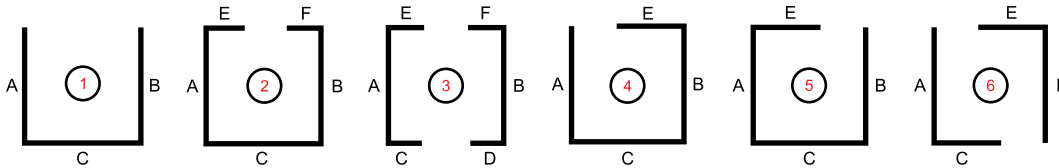
Please fill out one form (front and back) per cab and FAX to **800.732.2746**

- UPS Ground Will Call

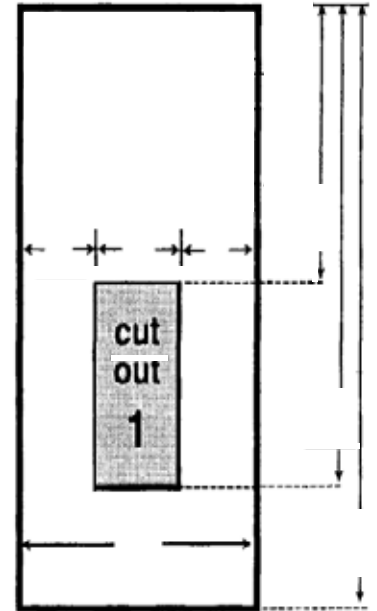
Job Name : _____
 PO # : _____

Expedited Shipping
 24 Hour Rush
 Next Day 2nd Day

Styles of Cabs Mark Cab Style



Fill in dimensions of Front Return(s):



Quantity / Sets

Specify number of complete sets: _____

Specify width of panels:

Sides (2): _____ Back (1): _____

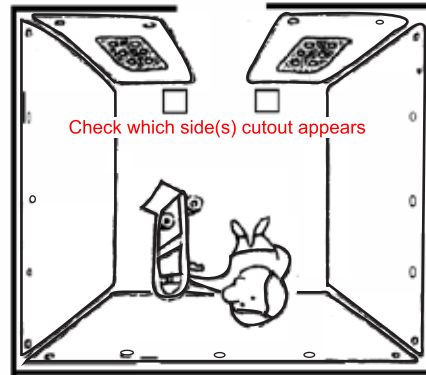
Front(s) Left: _____ Right: _____

Specify height of **pads**:

Standard 86" - 2" = 84"

Extra Tall" _____ - 2" = _____"

(Measure from wall stud in elevator or hook point to floor, Subtract 2 inches in compliance with government regulations)



Back

Protective Pad Options

Fabric



Canvas

Vinyl

Custom _____

Standard Color

Blue

Tan

Grey

Brown

Premium Color

Black

Red

Burgundy

Forest Green

Other _____

Please email artwork and detailed specifications to: **orders@ipropads.com** and reference the job name.

Custom Fabric

Embroidered Logo

Other Diagrams Enclosed

Individual side pads OR Wrap around one piece

Replacement Piece

Hanging Solutions

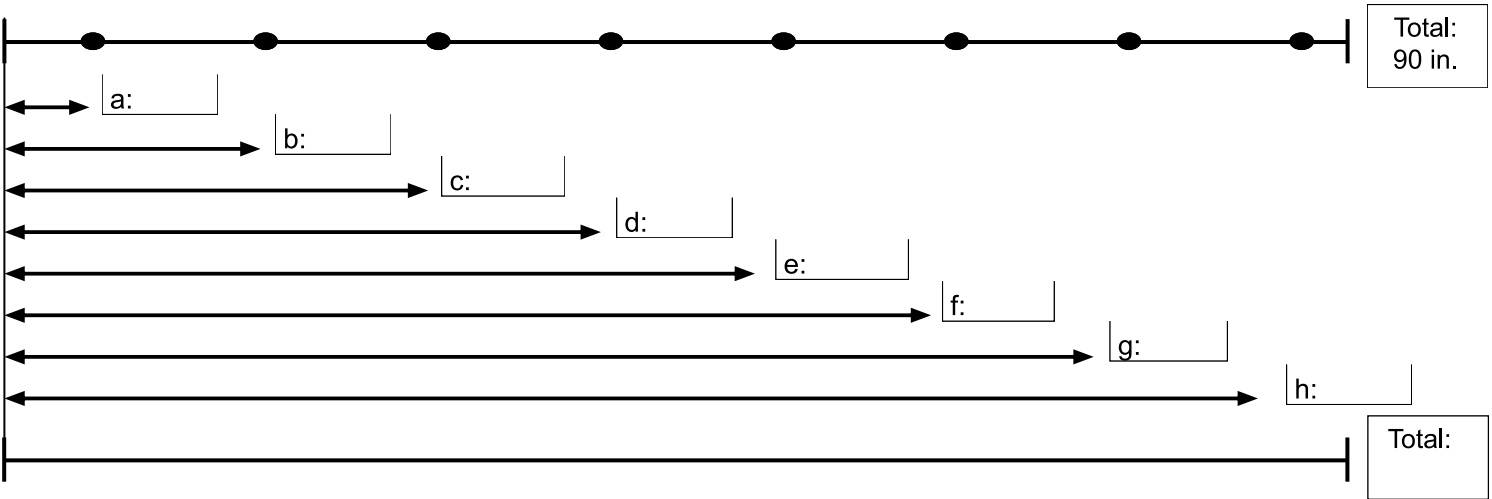
Please insert the style # of the hanging solution and the quantity you need.

Style # : _____ Quantity : _____ Chrome Brass Aluminum
 Style # : _____ Quantity : _____ Chrome Brass Aluminum
 Style # : _____ Quantity : _____ Chrome Brass Aluminum

Cab Dimensions - Grommet Spacing

If the spacing is custom, please fill out the following section. Working from left to right in a continuous manner.

Sample:



Wall A:

a: _____ b: _____ c: _____ d: _____ e: _____ f: _____ g: _____ h: _____

Total width: in.

Wall B:

a: _____ b: _____ c: _____ d: _____ e: _____ f: _____ g: _____ h: _____

Total width: in.

Wall C:

a: _____ b: _____ c: _____ d: _____ e: _____ f: _____ g: _____ h: _____

Total width: in.

Wall D:

a: _____ b: _____ c: _____ d: _____ e: _____ f: _____ g: _____ h: _____

Total width: in.

Wall E:

a: _____ b: _____ c: _____ d: _____ e: _____ f: _____ g: _____ h: _____

Total width: in.

Wall F:

a: _____ b: _____ c: _____ d: _____ e: _____ f: _____ g: _____ h: _____

Total width: in.

Accessories

Please insert the quantity of each accessory you need.

Storage Bag: _____ Extension Pole Hanger: _____ Metal / Glass Cleaner: _____
 Other: _____

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Helpful assistance is a toll-free phone call away at **1-800-422-9737**