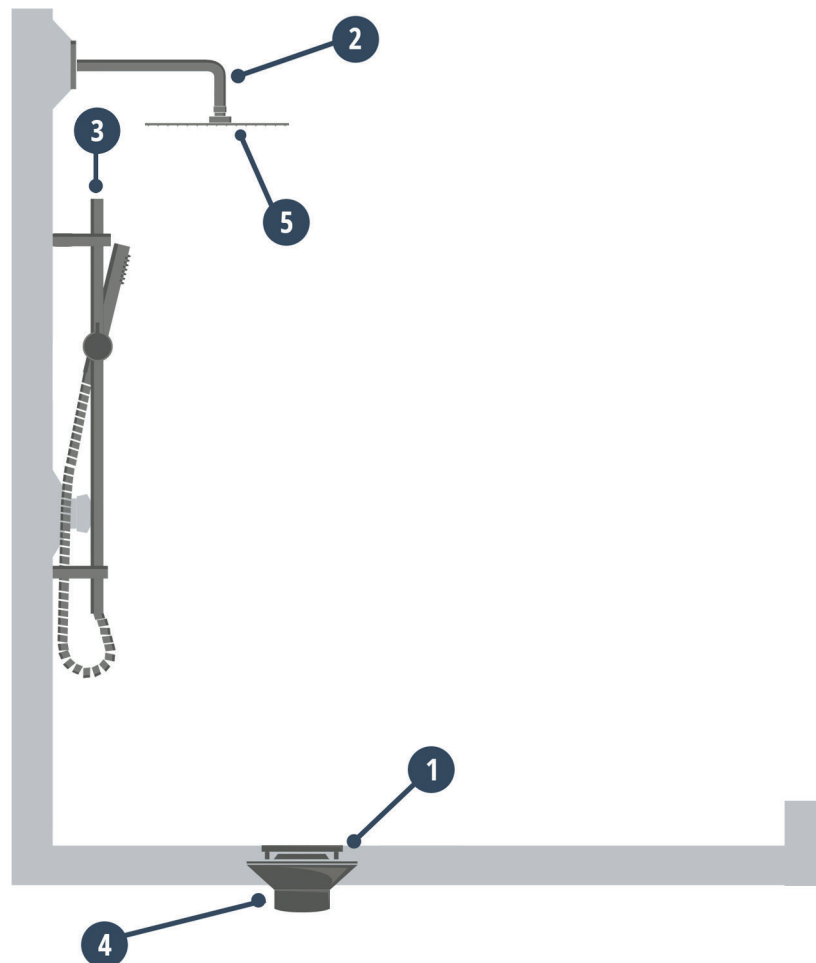


Project Location: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Customer Name: \_\_\_\_\_  
 Sales Order Number: \_\_\_\_\_

- 1. Drain Grid\* \_\_\_\_\_
- 2. Shower Arm \_\_\_\_\_
- 3. Shower Rail & Handshower \_\_\_\_\_
- 4. Drain Body\* \_\_\_\_\_
- 5. Shower Head \_\_\_\_\_



Mandatory
  Not Mandatory
 \*Available as a Complete Kit