

DEYS FABRICATING LTD.
1089 Sarnia Rd, London, Ontario N6H 5J9
Tel: (519) 657-6203 Fax: (519) 657-0210
TOLL FREE 1-800-661-DEYS(3397)

SPECIAL LINER ORDER FORM

Dealer Name: _____

Address: _____

Date: _____

City: _____ P.C. _____

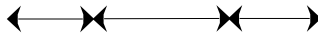
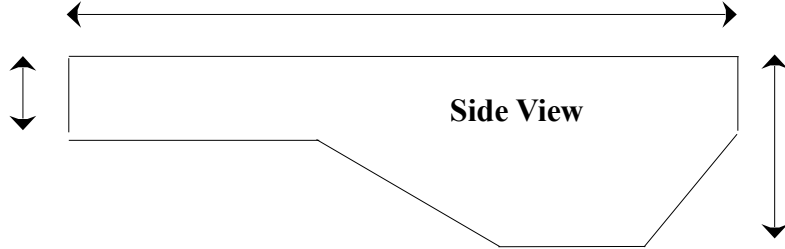
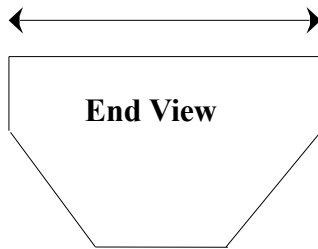
Your Name: _____

Phone: _____ Fax: _____

P.O.: _____ Tag: _____

Rectangle

Pool Size _____ X _____



Corners:

Size: _____

Type: _____

Beading: (Circle) **Mil:**

White Black 20 Mil: _____

Grey Tan 30 Mil: _____

Bowled Hopper: Yes: _____ No: _____

Pattern:

Wall: _____

Floor: _____

Perimeter: _____ Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____

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Special Liner Order Form

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Address: _____

Date: _____

City: _____ P.C. _____

Your Name: _____

Phone: _____ Fax: _____

P.O.: _____ Tag: _____

Kidney

Wall Height: _____

Depth: _____

Pattern: _____

Wall: _____

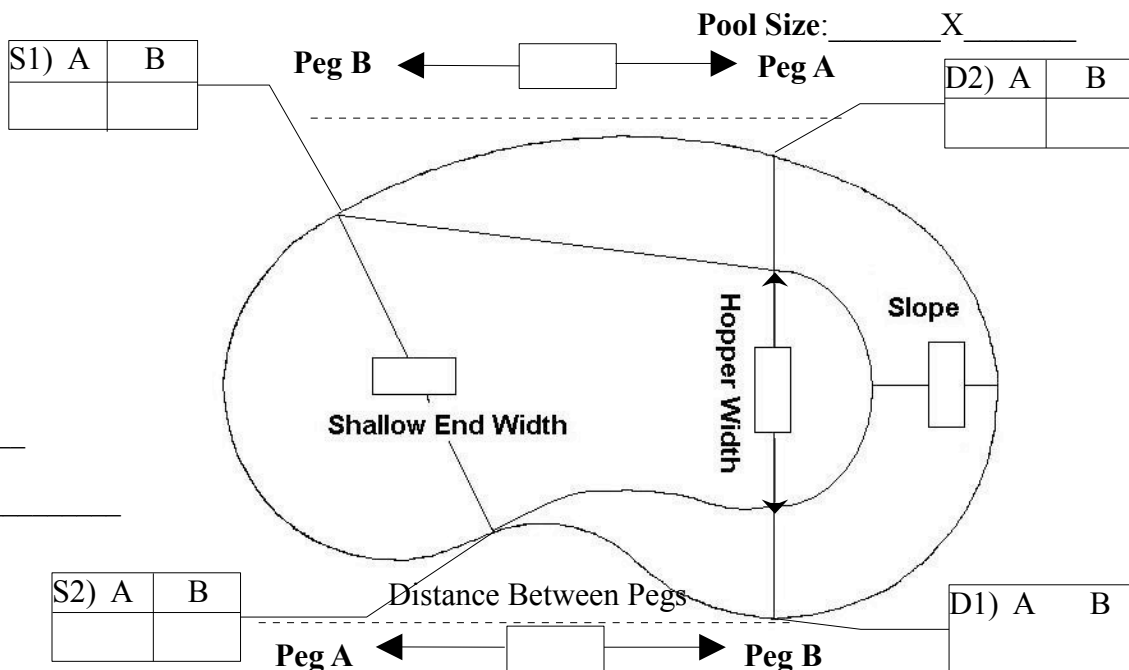
Floor: _____

Perimeter: _____

Manufacturer: _____

Bead: (circle) White

Black Grey Tan



PT	A	B	PT	A	B	PT	A	B	PT	A	B	PT	A	B
1			9			17			25			33		
2			10			18			26			34		
3			11			19			27			35		
4			12			20			28			36		
5			13			21			29			37		
6			14			22			30			38		
7			15			23			31			39		
8			16			24			32			40		

Instructions:

- 1) Place pegs A and B between 10-20 feet apart **OUTSIDE THE DOTTED LINE**.
- 2) Measure from points S1, S2, D1 and D2 to peg A, then peg B.
- 3) Measure from points A & B in 2-3 foot intervals around the perimeter of the pool and record on chart. All spaces may not be needed. Use another sheet if more are required.
- 4) **Fill in all Measurements on Drawing** in Feet and Inches (to the nearest Inch).

NOTE: This sheet will work for Straight Back Kidneys

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Phone: _____ Fax: _____

P.O.: _____ Tag: _____

Kidney

Wall Height: _____

Depth: _____

Pattern: _____

Wall: _____

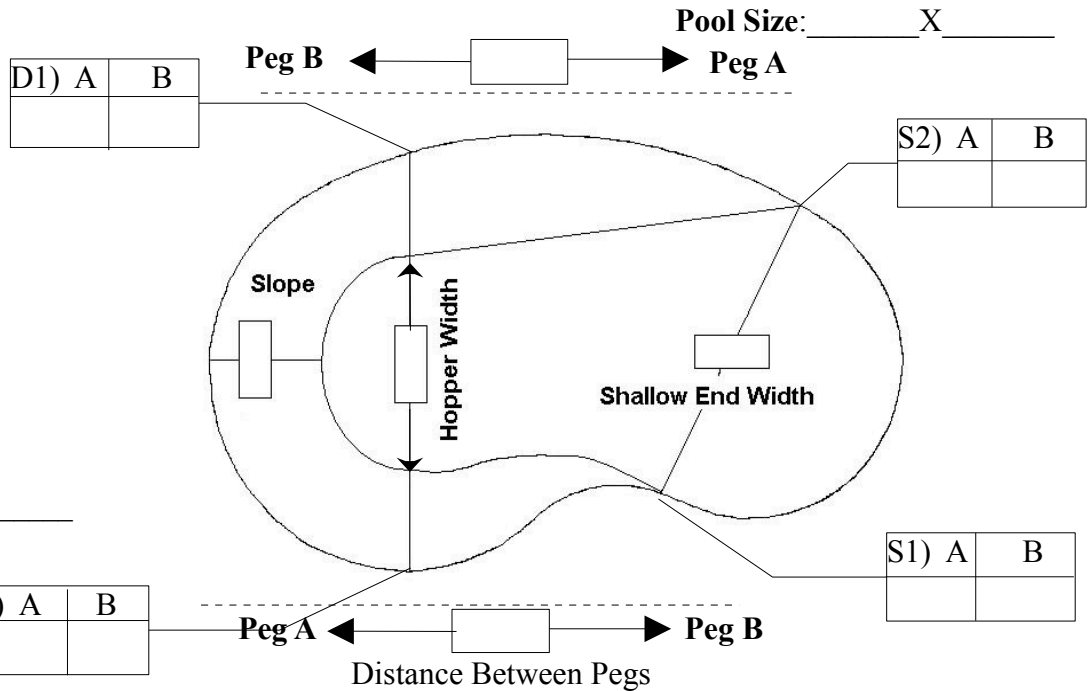
Floor: _____

Perimeter: _____

Manufacturer: _____

Bead: (circle) White

Black Grey Tan



PT	A	B	PT	A	B	PT	A	B	PT	A	B	PT	A	B
1			9			17			25			33		
2			10			18			26			34		
3			11			19			27			35		
4			12			20			28			36		
5			13			21			29			37		
6			14			22			30			38		
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Your Name: _____

Phone: _____ Fax: _____

P.O.: _____ Tag: _____

Hump-Back Kidney

Peg B ← [] → Peg A Pool Size: _____ X _____

Wall Height: _____

S1) A	B

Depth: _____

D2) A	B

Pattern: _____

Wall: _____

Floor: _____

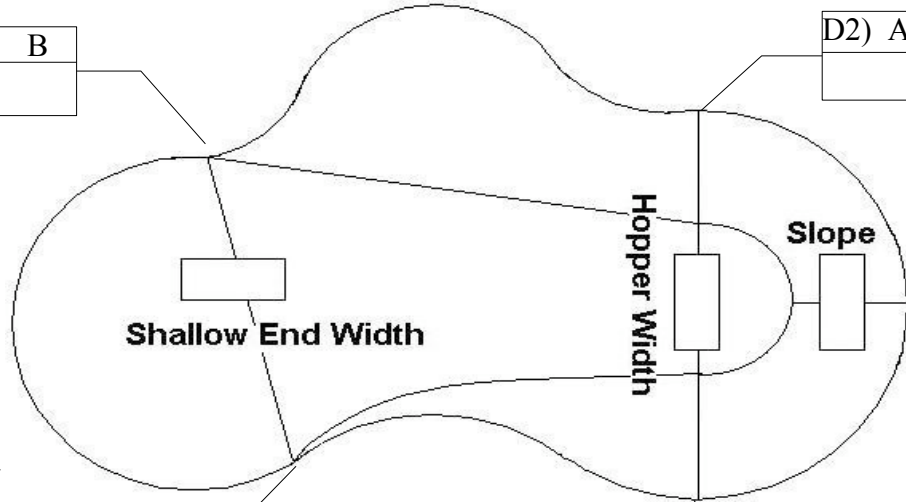
Perimeter: _____

Manufacturer: _____

Bead: (circle) White

Black Grey Tan

S2) A	B



Peg A ← [] → Peg B
Distance Between Pegs

D1) A	B

PT	A	B	PT	A	B	PT	A	B	PT	A	B	PT	A	B
1			9			17			25			33		
2			10			18			26			34		
3			11			19			27			35		
4			12			20			28			36		
5			13			21			29			37		
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Your Name: _____

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P.O.: _____ Tag: _____

Hump-Back Kidney

Peg B ← → Peg A Pool Size: _____ X _____

Wall Height: _____

D1)	A	B

Depth: _____

S2)	A	B

Pattern: _____

Wall: _____

Floor: _____

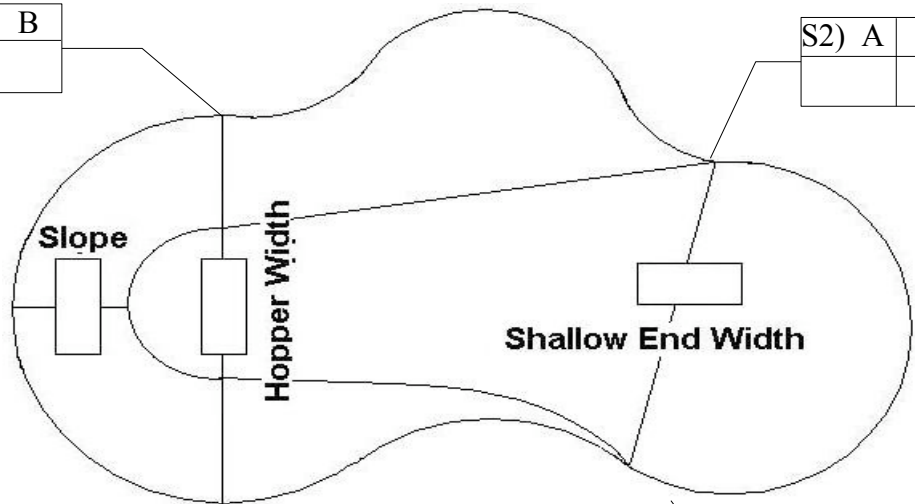
Perimeter: _____

Manufacturer: _____

Bead: (circle) White

Black Grey Tan

S2)	A	B



Peg A ← → Peg B

Distance Between Pegs

PT	A	B	PT	A	B	PT	A	B	PT	A	B	PT	A	B
1			9			17			25			33		
2			10			18			26			34		
3			11			19			27			35		
4			12			20			28			36		
5			13			21			29			37		
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Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Californian

Peg B ← → Peg A Pool Size: X

S1) A	B

The diagram shows an irregular pool shape. Points 1, 2, and 3 are on the left curved edge. Points 4, 5, 6, and 7 are along the bottom edge. A dashed line runs horizontally through the middle of the pool. A 'Slope' area is indicated on the right side with a small box for measurement.

D2) A	B

Wall Height: _____
Depth: _____

S2) A	B

Peg A ← → Peg B

D1) A	B

Corners: _____ **Beading:** (circle) **Mil:** _____ **Pattern:** _____
 Type: _____ White Black 30 Mil: _____ Wall: _____
 Size: _____ Grey Tan Floor: _____
 Perimeter: _____ Bowled Hopper: Yes: ___ No: ___ Manufacturer: _____

PT	A	B	PT	A	B	PT	A	B	PT	A	B	PT	A	B
*1			8			15			22			29		
*2			9			16			23			30		
*3			10			17			24			31		
*4			11			18			25			32		
*5			12			19			26			33		
*6			13			20			27			34		
*7			14			21			28			35		

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Californian

Peg B ← [] → Peg A Pool Size: _____ X _____

D1) A B

--	--

Wall Height: []

Depth: []

D2) A B

--	--

Peg A ← [] → Peg B

S1) A B

--	--

S2) A B

--	--

Corners: _____ **Beading:** (circle) _____ **Mil:** _____ **Pattern:** _____
Type: _____ White Black 30 Mil: _____ Wall: _____
Size: _____ Grey Tan Floor: _____
Perimeter: _____ Bowled Hopper: Yes: ___ No: ___ Manufacturer: _____

PT	A	B	PT	A	B	PT	A	B	PT	A	B	PT	A	B
*1			8			15			22			29		
*2			9			16			23			30		
*3			10			17			24			31		
*4			11			18			25			32		
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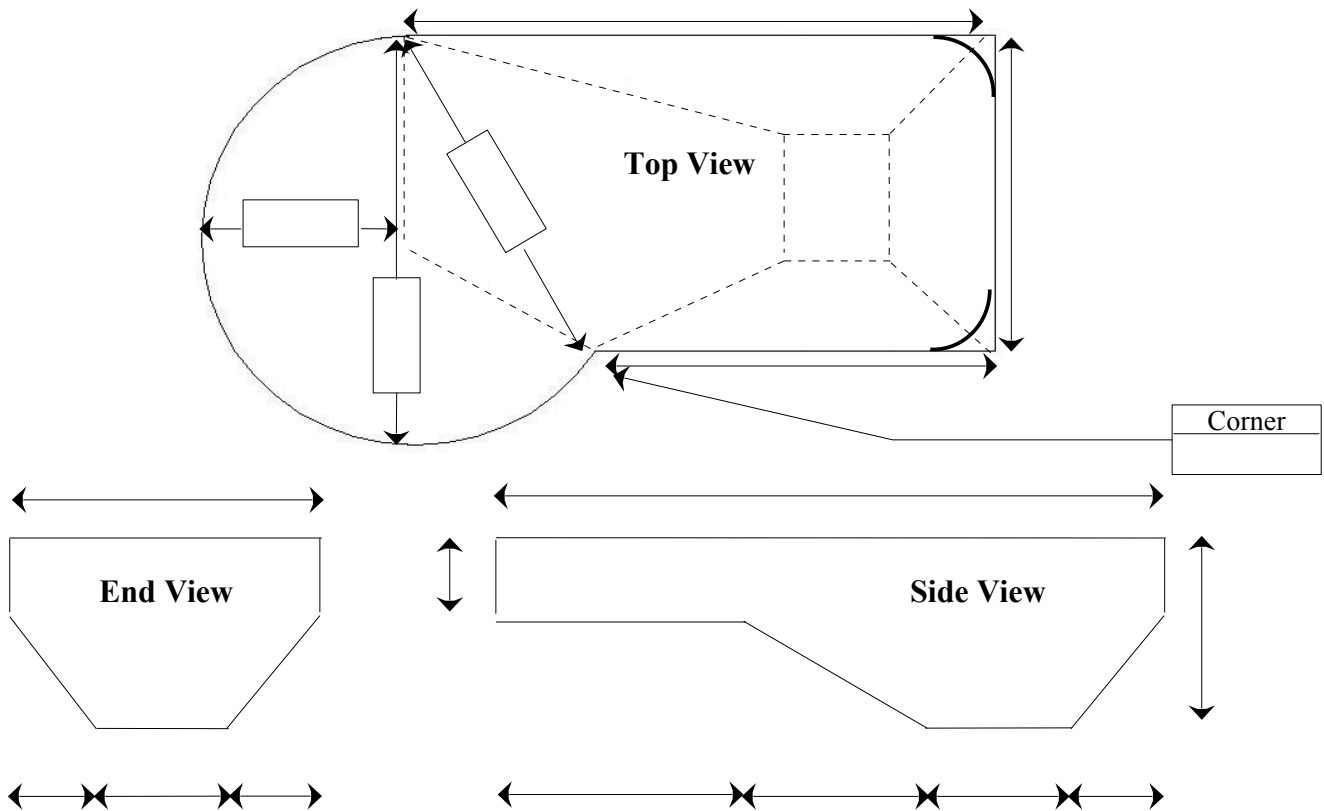
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Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Monaco

Pool Size _____ X _____



Corners:

Size: _____

Type: _____

Perimeter: _____

Beading: (Circle) **Mil:**

White Black 30 Mil: _____

Grey Tan

Bowled Hopper: Yes: _____ No: _____

Manufacturer: _____

Pattern:

Wall: _____

Floor: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

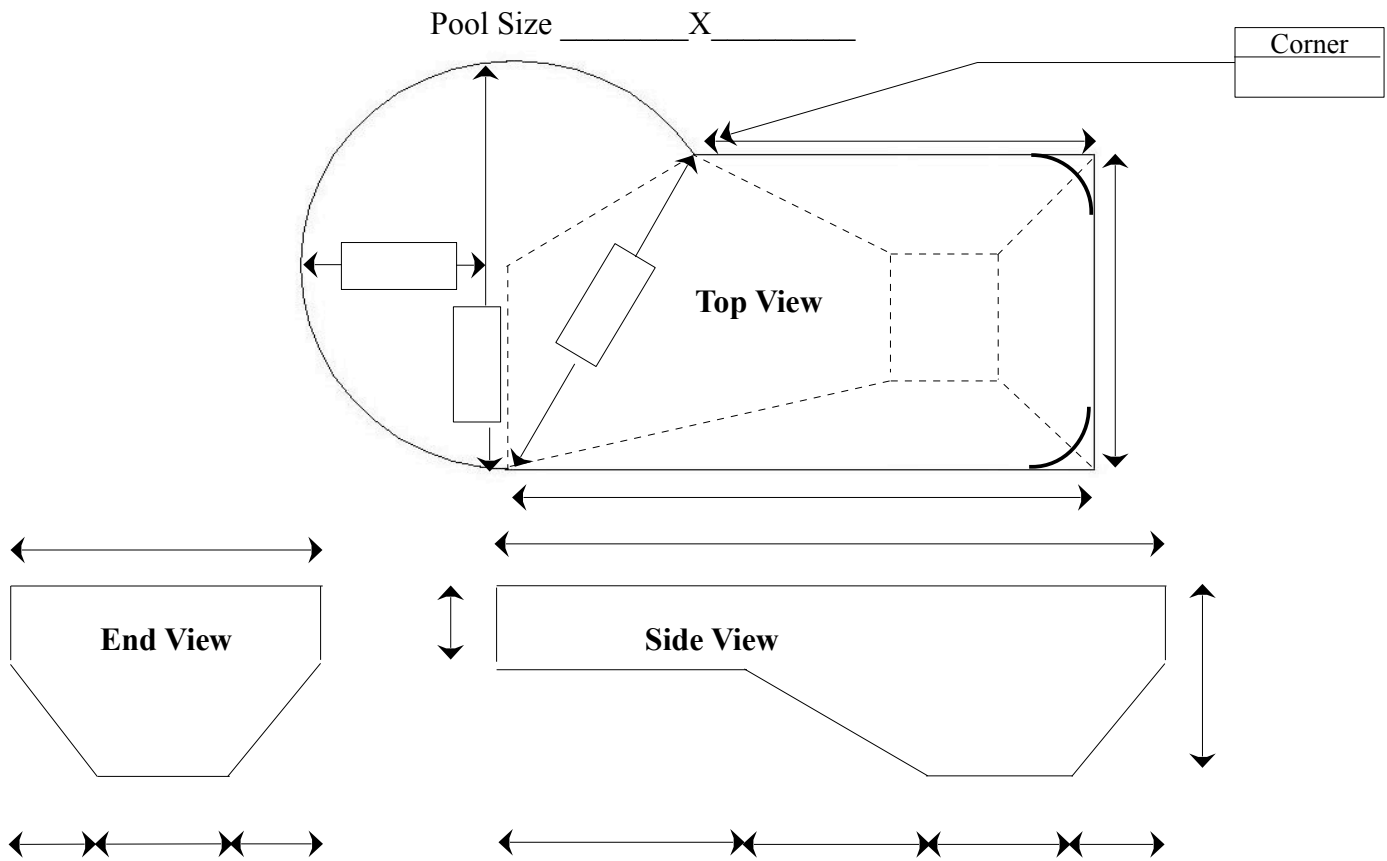
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City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Monaco



Corners: _____ **Beading:** (Circle) **Mil:** _____ **Pattern:** _____
Size: _____ White Black 30 Mil: _____ Wall: _____
Type: _____ Grey Tan Floor: _____
Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

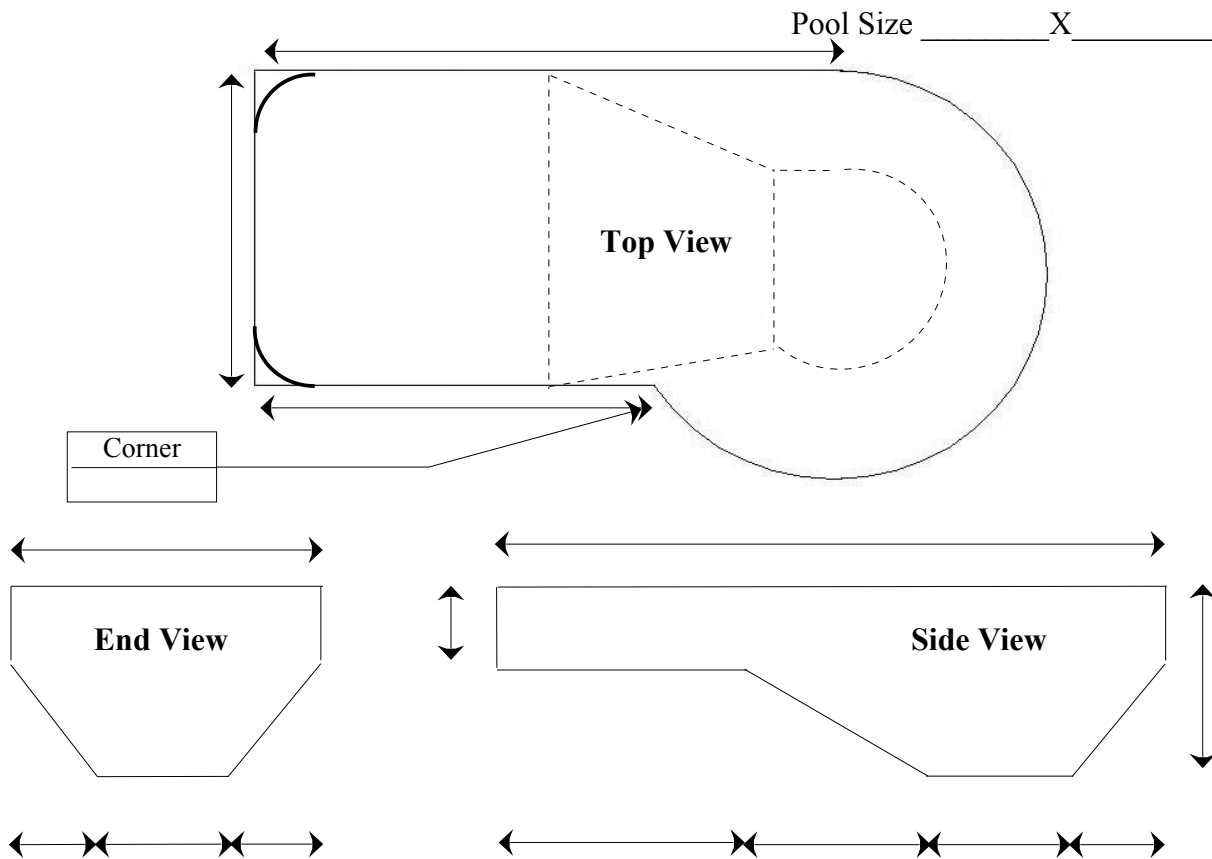
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Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Monaco Reverse



Corners: _____ **Beading:** (Circle) **Mil:** _____ **Pattern:** _____
Size: _____ White Black 30 Mil: _____ Wall: _____
Type: _____ Grey Tan Floor: _____
Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

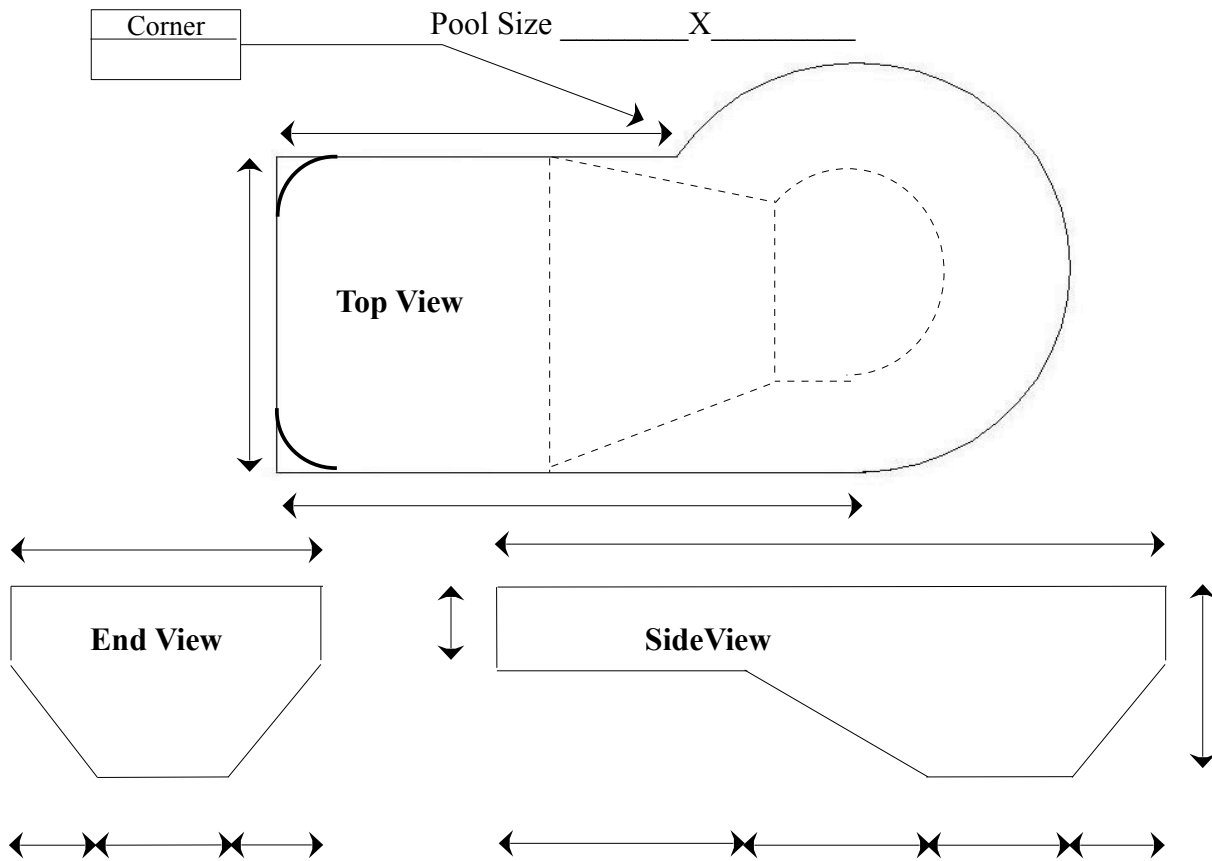
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Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Monaco Reverse



Corners: _____ **Beading:** (Circle) **Mil:** _____ **Pattern:** _____
Size: _____ White Black 30 Mil: _____ Wall: _____
Type: _____ Grey Tan Floor: _____
Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

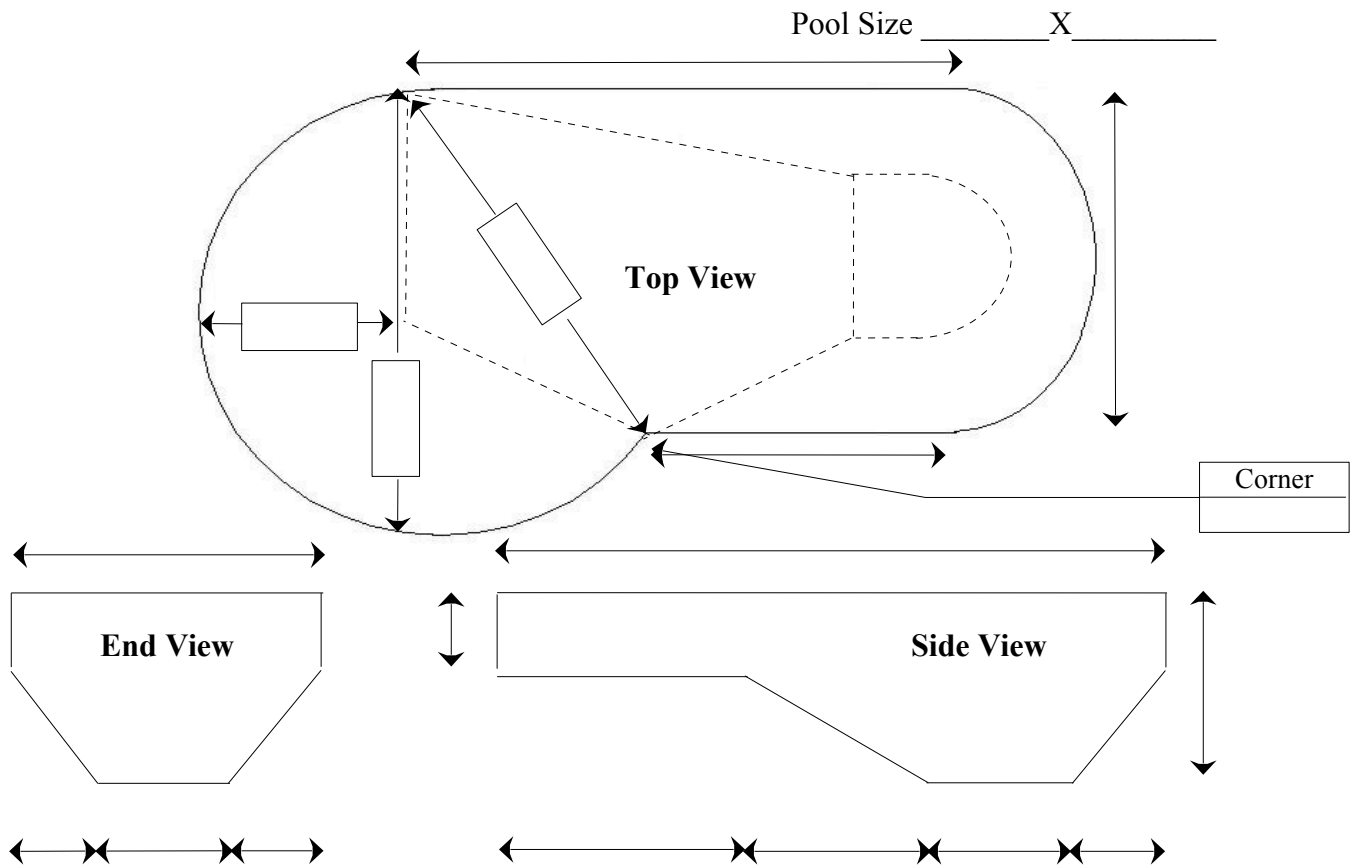
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Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Barbados



Beading:(circle)

White Black
Grey Tan

Mil:

30 Mil: _____

Pattern:

Wall: _____

Floor: _____

Bowled Hopper: Yes: _____ No: _____

Perimeter: _____ Manufacturer: _____

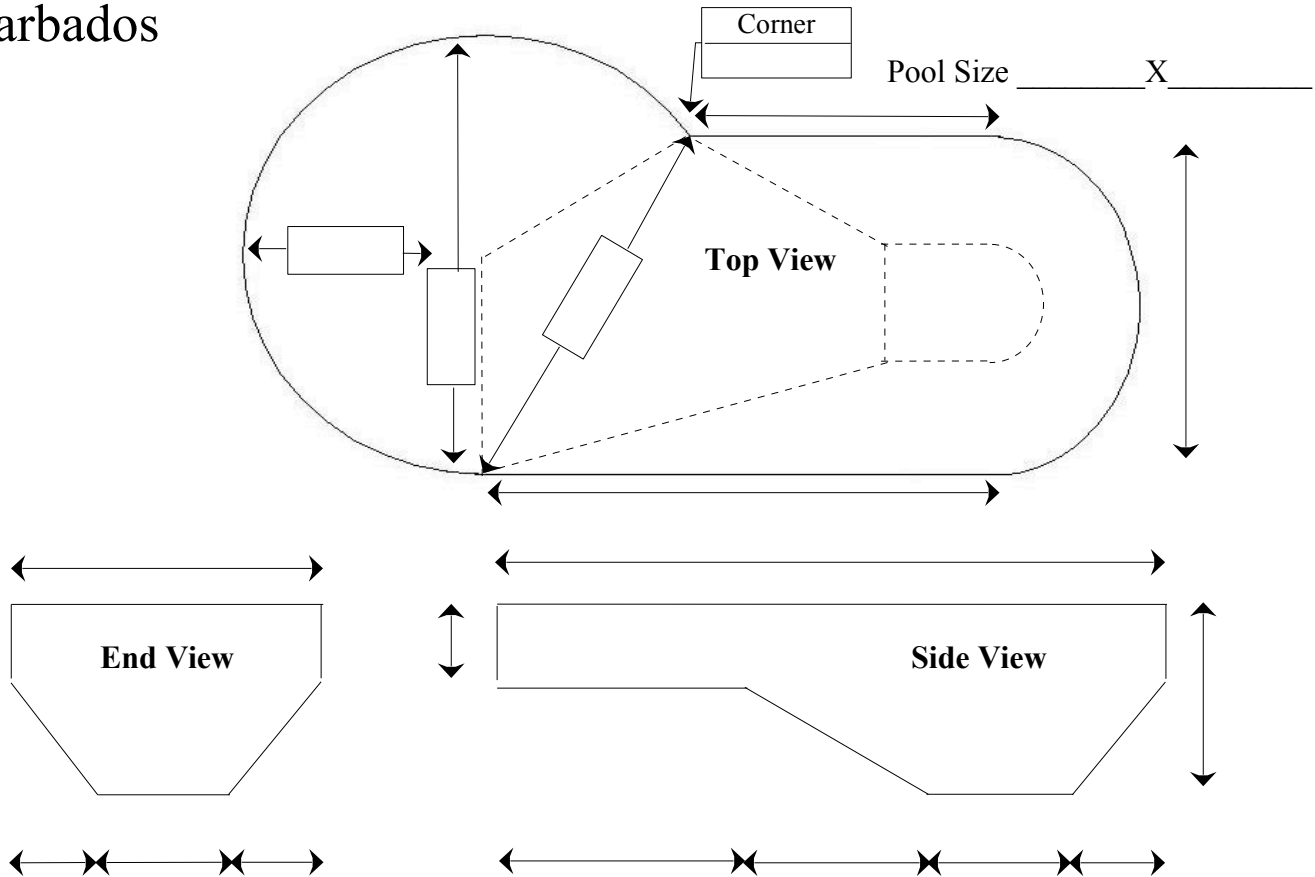
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Barbados



Beading:(circle) **Mil:** **Pattern:**
White Black 30 Mil: _____ Wall: _____
Grey Tan Floor: _____
Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

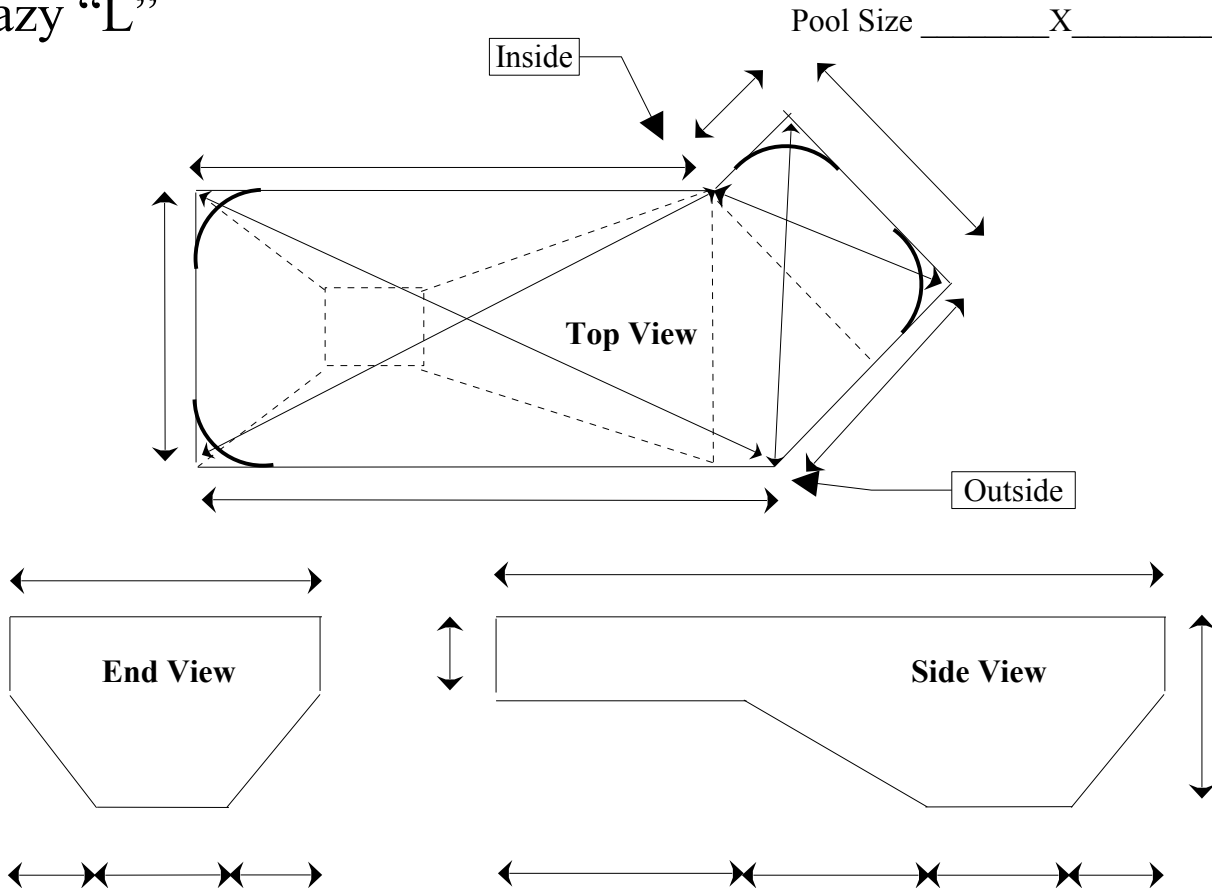
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City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Lazy "L"



Corners: _____ **Beading:** (circle) **Mil:** _____ **Pattern:** _____
Outside: _____ White Black 30 Mil: _____ Wall: _____
Inside: _____ Grey Tan Floor: _____
Ends: _____ Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

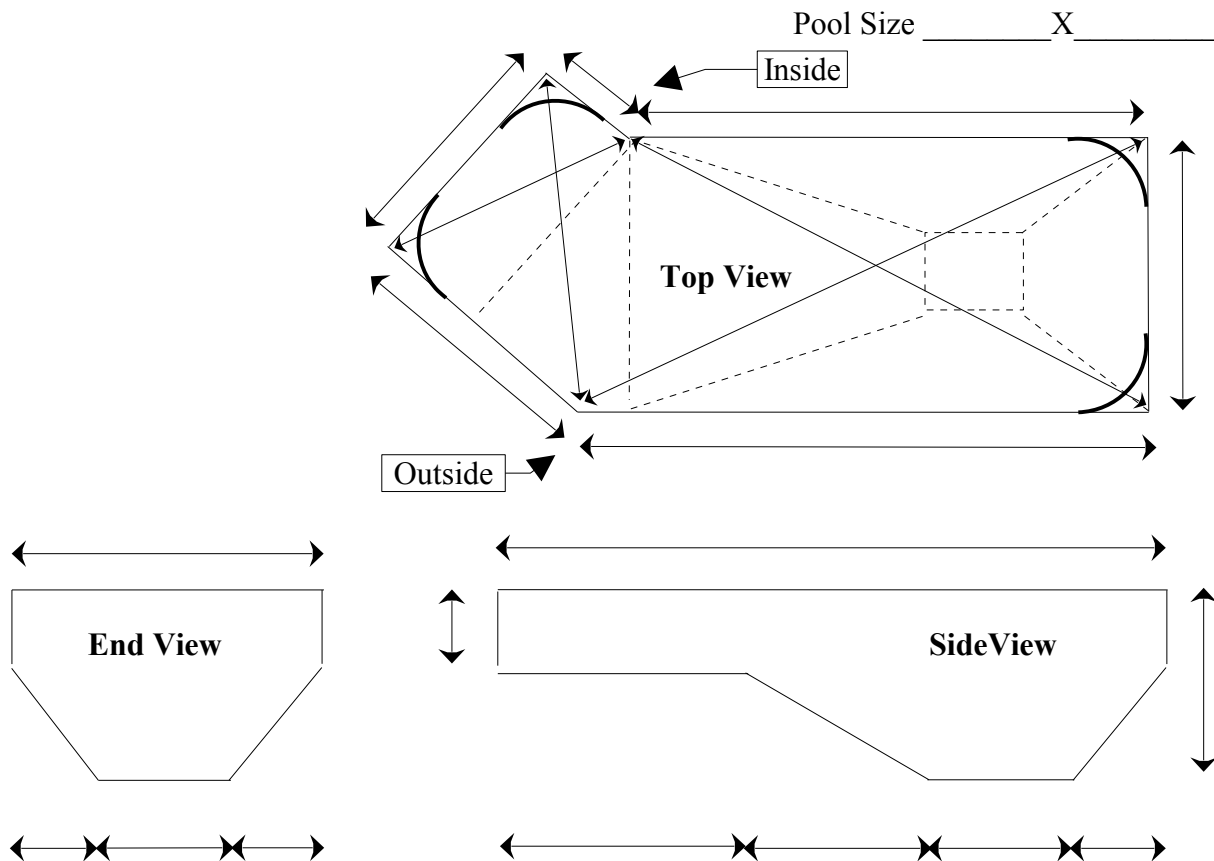
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Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Lazy "L"



Corners: Outside: _____ Inside: _____ Ends: _____ Perimeter: _____
Beading: (Circle) White Black 30 Mil: _____ Grey Tan
Mil: _____
Pattern: Wall: _____ Floor: _____
Bowled Hopper: Yes: _____ No: _____
Manufacturer: _____

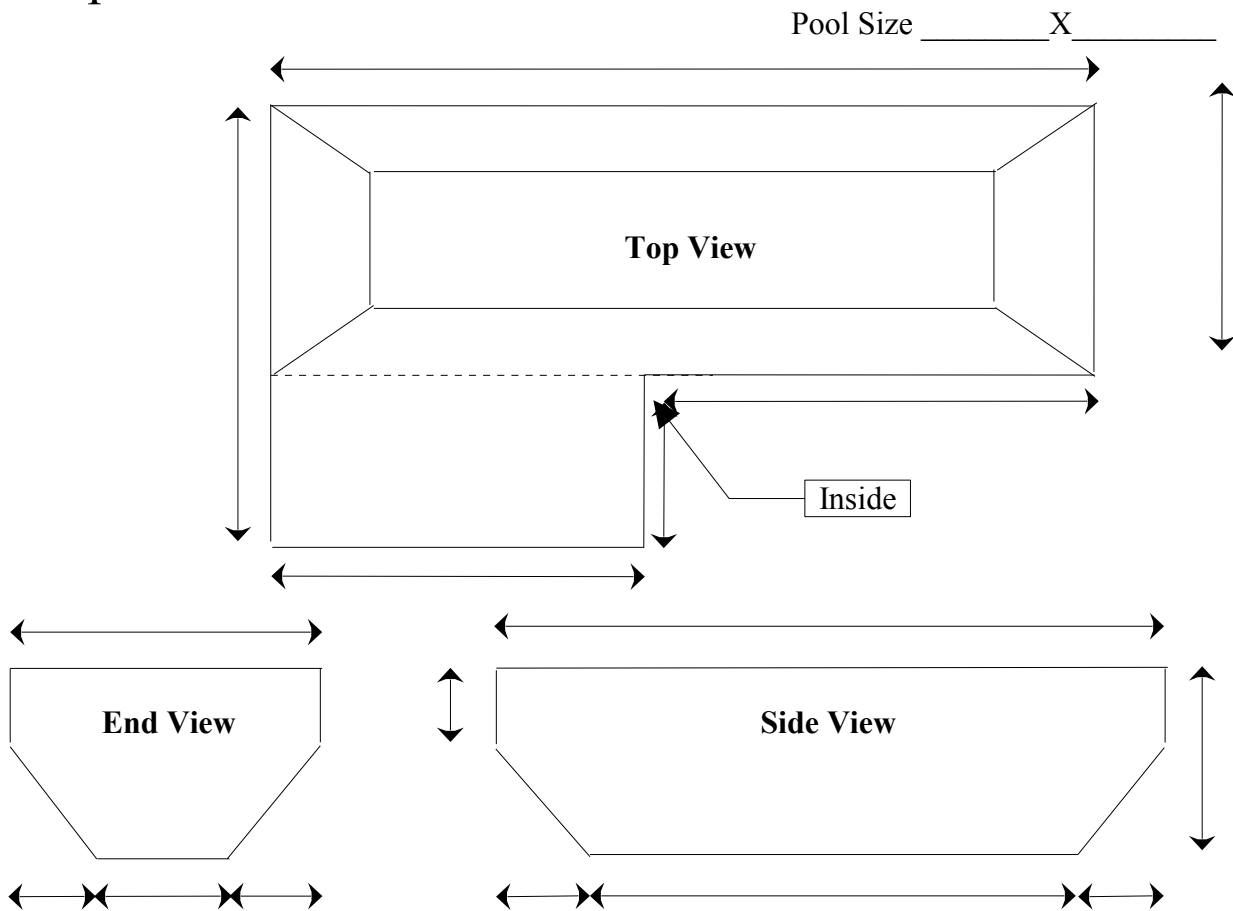
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L-Shape



Corners: _____ **Beading:** (Circle) _____ **Mil:** _____ **Pattern:** _____
Inside: _____ White Black 30 Mil: _____ Wall: _____
Outside: _____ Grey Tan Floor: _____
Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

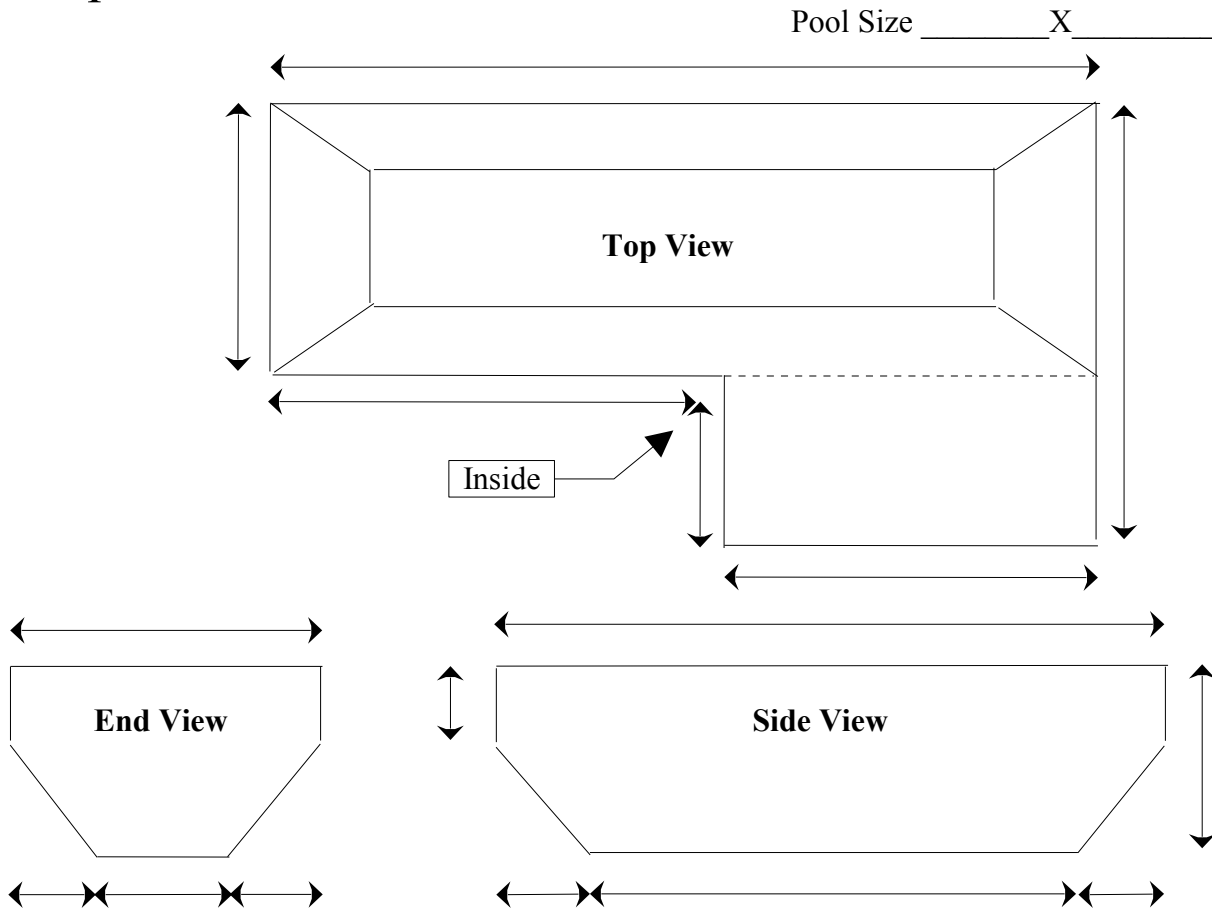
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L-Shape



Corners: Inside: _____ Outside: _____
Beading: (Circle) White Black Grey Tan
Mil: 30 Mil: _____
Pattern: Wall: _____ Floor: _____
Bowled Hopper: Yes: _____ No: _____
Perimeter: _____ Manufacturer: _____

Office Use Only
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Advised: _____
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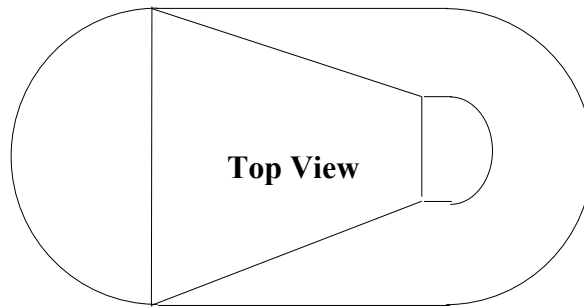
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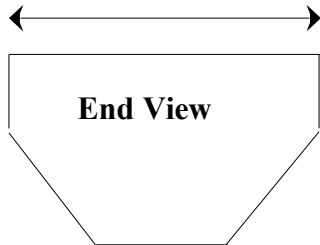
Oval

Pool Size _____ X _____

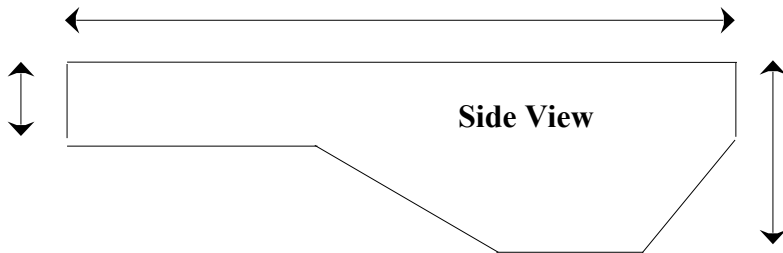


Top View

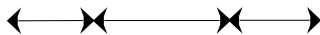
Straight Wall Measurement



End View



Side View



Beading: (Circle)

Mil:

Pattern:

White Black

30 Mil: _____

Wall: _____

Grey Tan

Floor: _____

Bowled Hopper: Yes: _____ No: _____

Perimeter: _____ Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____

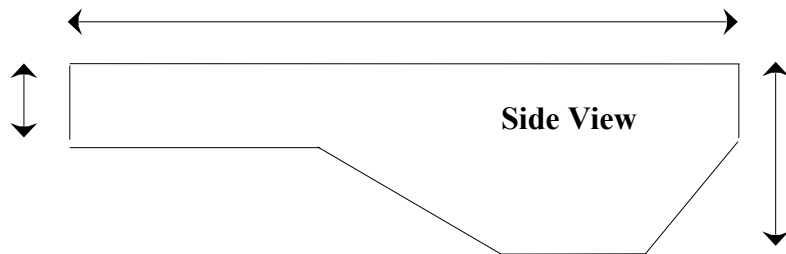
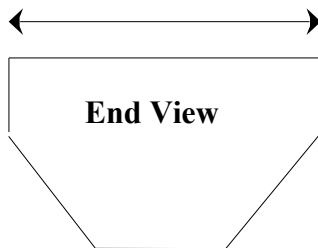
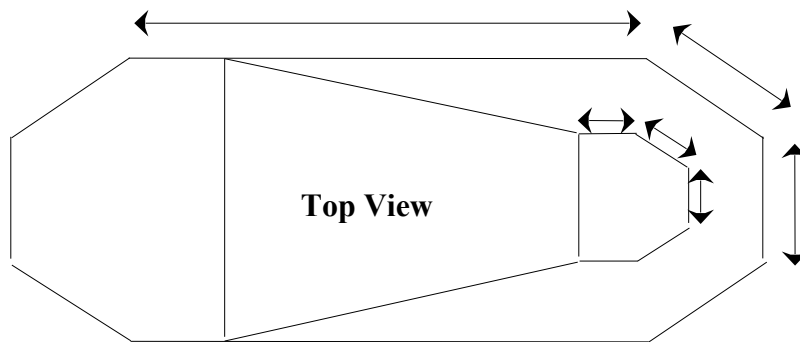
DEYS FABRICATING LTD.
1089 Sarnia Rd, London, Ontario N6H 5J9
Tel: (519) 657-6203 Fax: (519) 657-0210
TOLL FREE 1-800-661-DEYS(3397)

SPECIAL LINER ORDER FORM

Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Extended Octagon

Pool Size _____ X _____



Beading:

White Black
Grey Tan

Mil:

30 Mil: _____

Pattern:

Wall: _____

Floor: _____

Bowled Hopper: Yes: _____ No: _____

Perimeter: _____ Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____

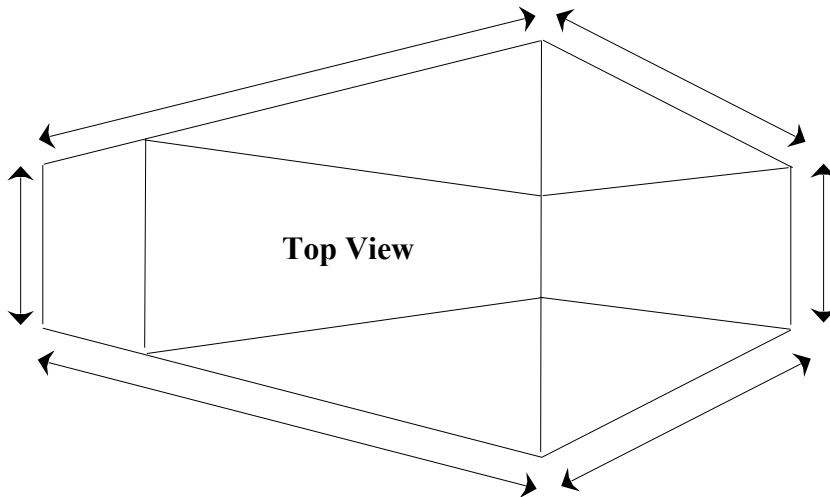
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SPECIAL LINER ORDER FORM

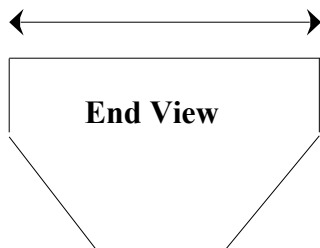
Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Kite

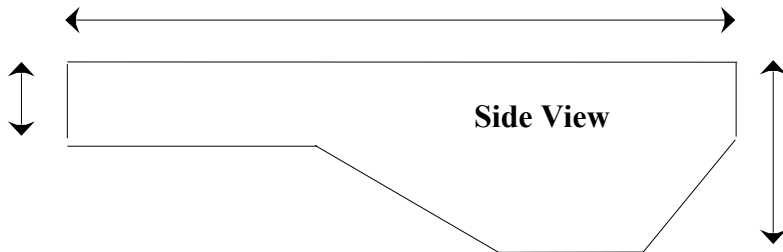
Pool Size _____ X _____



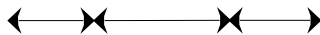
Top View



End View



Side View



Beading: (circle)

Mil:

Pattern:

White

Black

30 Mil: _____

Wall: _____

Grey

Tan

Floor: _____

Bowled Hopper: Yes: _____ No: _____

Perimeter: _____ Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

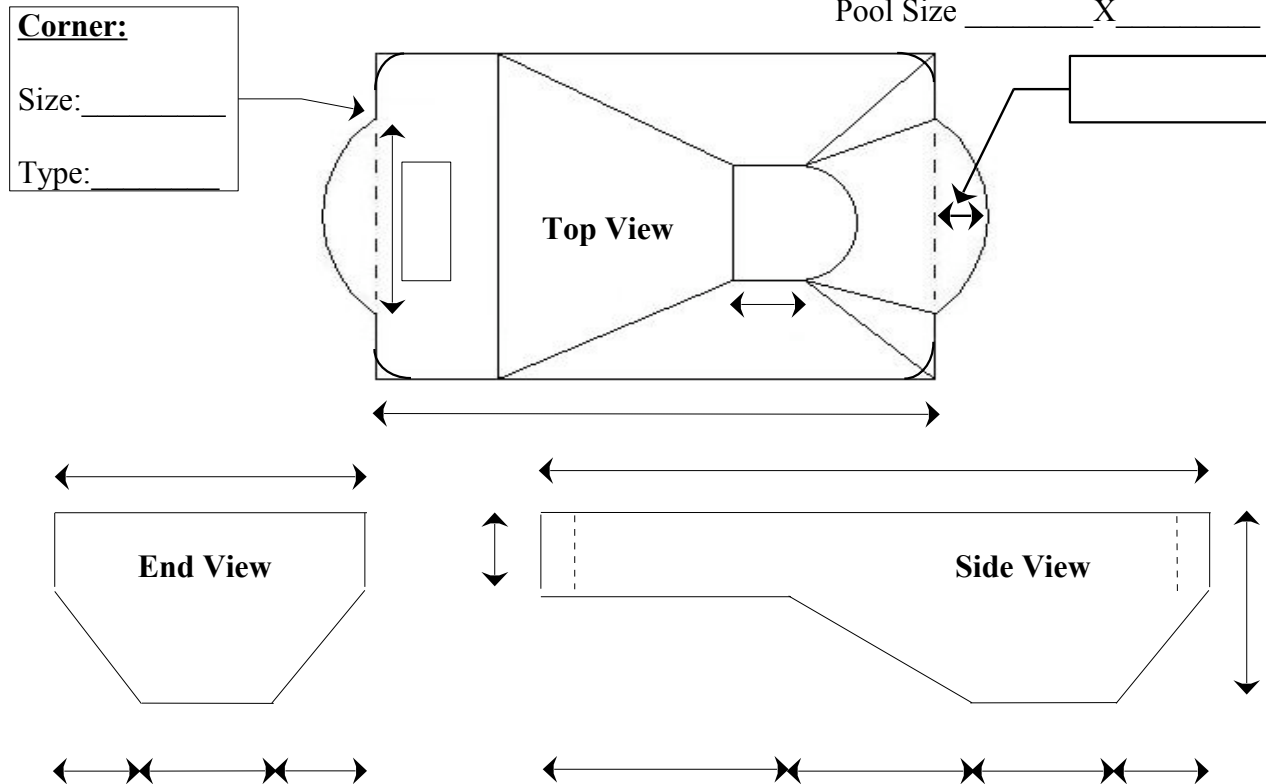
PST: _____ GST: _____

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SPECIAL LINER ORDER FORM

Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Roman



Corners: _____
Size: _____
Type: _____

Beading: (Circle) **Mil:** _____
White Black 30 Mil: _____
Grey Tan
Bowled Hopper: Yes: _____ No: _____

Pattern: _____
Wall: _____
Floor: _____

Perimeter: _____ Manufacturer: _____

Office Use Only
Serial #: _____
Advised: _____
Ship By: _____
Price: _____
Net: _____
PST: _____ GST: _____

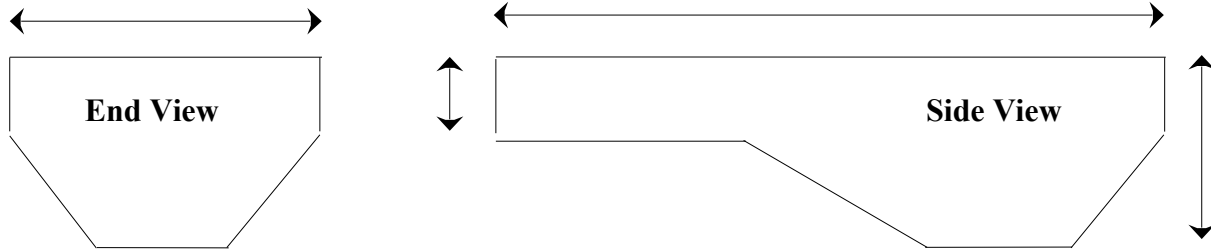
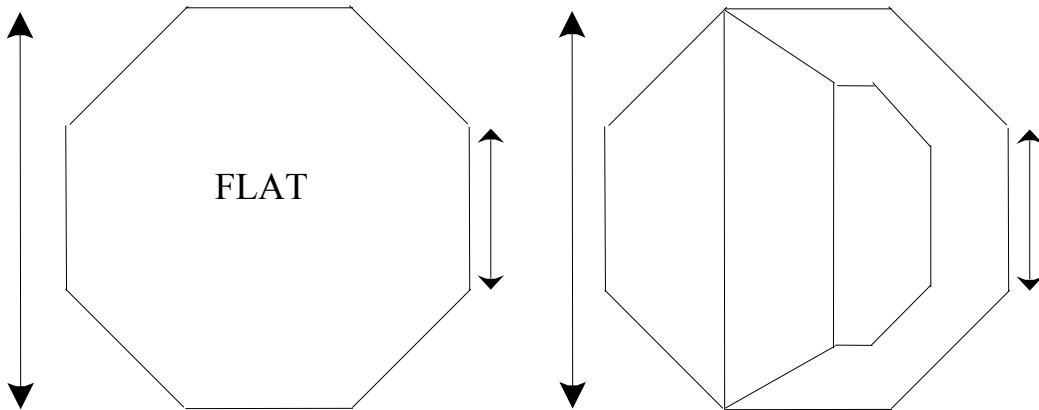
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TOLL FREE 1-800-661-DEYS(3397)

SPECIAL LINER ORDER FORM

Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Octagon

Pool Size _____



Beading: (Circle)

White Black

Grey Tan

Mil:

30 Mil: _____

Pattern:

Wall: _____

Floor: _____

Bowled Hopper: Yes: _____ No: _____

Perimeter: _____ Manufacturer: _____

Office Use Only	
Serial #:	_____
Advised:	_____
Ship By:	_____
Price:	_____
Net:	_____
PST:	_____ GST: _____

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SPECIAL LINER ORDER FORM

Dealer Name: _____

Address: _____

Date: _____

City: _____ P.C. _____

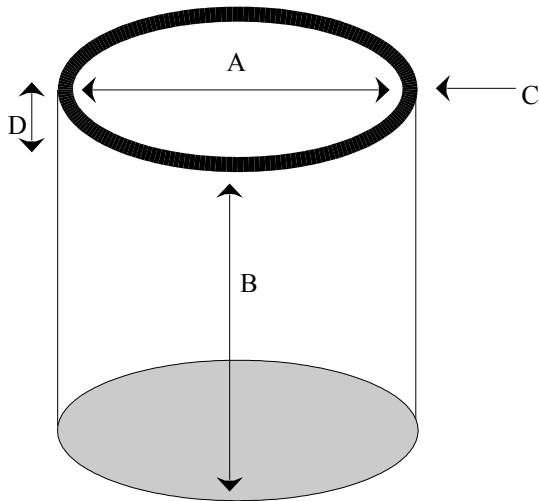
Your Name: _____

Phone: _____ Fax: _____

P.O.: _____ Tag: _____

Hot Tub

Liner Size _____



A - Inside Diameter: _____

B - Inside Wall Height: _____

C - Stave Thickness: _____

D - Overlap: _____

For Oval Hot Tubs, You Must Supply a Paper Template of The Floor

Beading:

Regular: _____

Reverse: _____

Overlap: _____

Colour/Pattern: _____

Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____

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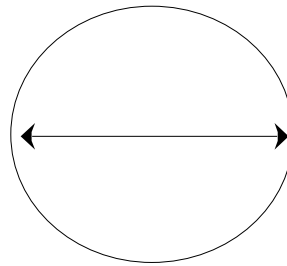
SPECIAL LINER ORDER FORM

Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Please Check For Exact Pool Measurements

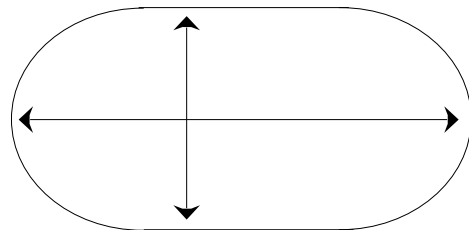
A.G. Round

Size: _____
Actual: _____
Perimeter: _____
(Diameter X 3.14 = Perimeter)



A.G. Oval

Size: _____ X _____
Actual: _____ X _____
Perimeter: _____



Pool Wall Height: _____

Bead: Regular: _____ O/L: _____ U-Bead : _____

Bottom: Flat: _____ Dished: _____ Hopper: _____

Mil: 20: _____

Pattern/Colour: Wall: _____ Floor: _____

Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____

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TOLL FREE 1-800-661-DEYS(3397)

SPECIAL LINER ORDER FORM

Dealer Name: _____

Address: _____ Date: _____

City: _____ P.C. _____ Your Name: _____

Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Tank Liner

Tank Size _____ X _____

Tank Shape: _____

Office Use Only

Corners: _____ **Beading:** _____ **Mil:** _____

Size: _____ Bead: _____

Type: _____ O/L: _____ **Colour:** _____

Perimeter: _____ Manufacturer: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____

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Tel: (519) 657-6203 Fax: (519) 657-0210
TOLL FREE 1-800-661-DEYS(3397)

SPECIAL LINER ORDER FORM

Dealer Name: _____
Address: _____ Date: _____
City: _____ P.C. _____ Your Name: _____
Phone: _____ Fax: _____ P.O.: _____ Tag: _____

Vinyl Winter Cover

Pool Size: _____ X _____

Hanging Cover:

☐

Overlap Cover:

☐

Cover Size: _____ X _____

Corners:

Size: _____

Type: _____

Beading:

Regular: _____

Reverse: _____

Mil:

20 Mil 12" Wall: _____

16 Mil Floor: _____

Manufacturer: _____

Perimeter: _____

Office Use Only

Serial #: _____

Advised: _____

Ship By: _____

Price: _____

Net: _____

PST: _____ GST: _____