

SHUR-TRAK II™ SHORT STOP™ AND COVER-PRO® ORDER FORM

CONTACT INFORMATION

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ FAX _____
 BOX/TRAILER MAKE _____

CORRECT MEASUREMENTS ARE CRUCIAL TO GETTING THE RIGHT TARP FIT. PROVIDE ALL REQUESTED INFORMATION OR YOUR ORDER MAY BE DELAYED. **DO NOT** USE UNIVERSAL BOX SIZES. **ALWAYS** USE ACTUAL MEASUREMENTS.

G02OF-0410

REQUIRED MEASUREMENTS

TARP BODY LENGTH _____
Must answer this.

TARP WIDTH _____

FABRIC TYPE

MESH VINYL

FABRIC COLOR(S) _____

INSIDE BOX WIDTH _____

OUTSIDE BOX WIDTH _____

BOW SPACING

30" | Cover-Pro® 36" | Cover-Pro II® and Shur-Trak™ Short-Stop™

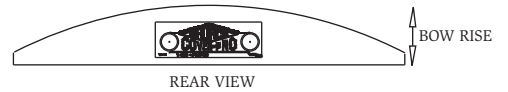
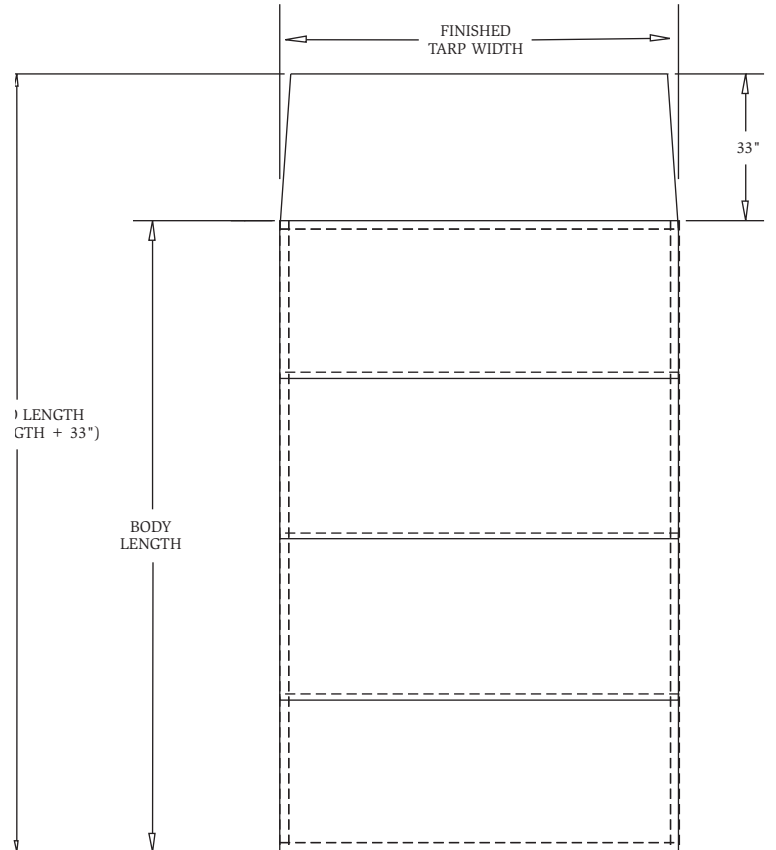
BOW COUNT* _____

BOW RISE _____

TARP FASTENER

POCKET BOLT-ON VELCRO LOOPS

*The two bows in the Rear Bow Stabilizer are counted as one.



fax 605.665.0501

Salesperson _____