



DiamondSlide

Bedlining Systems

DATA FORM

Fill out completely and fax or email to your local distributor for a quote.

Work Order No. _____

P. O. No. _____

Distributor: _____

Contact: _____

City, State: _____

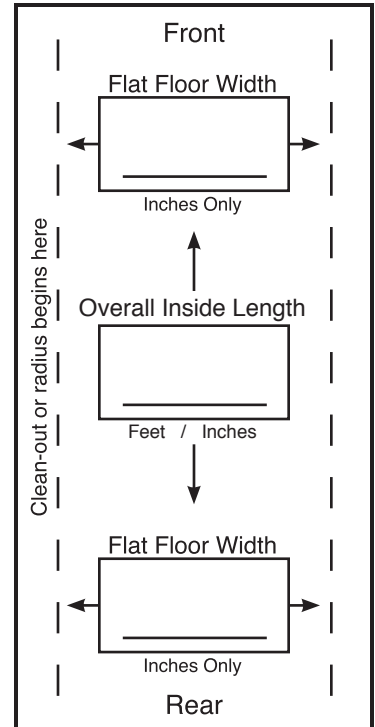
Fax: _____

Phone: _____

End User Company Name

Truck / Trailer / Container #

Tapered Bed? Yes No



Asphalt Hauled? Yes No
 Cover Strip Material: Aluminum Steel

FLOOR QTY. _____

Material	Thickness	Width	Length
<input type="checkbox"/> BLUEFIRE (Asphalt)	<input type="checkbox"/> 1/4"	<input type="checkbox"/> 96"	_____
<input type="checkbox"/> BLUEICE	<input type="checkbox"/> 3/8"	<input type="checkbox"/> 120"	_____
<input type="checkbox"/> MEDIUMDUTY	<input type="checkbox"/> 1/2"		
<input type="checkbox"/> SUPERFINE	<input type="checkbox"/> Kit Complete	<input type="checkbox"/> Material Only	

WELDED TO: (For COMBOLINER or Graduated Thickness liners only.)

<input type="checkbox"/> BLUEICE	<input type="checkbox"/> 3/8"	<input type="checkbox"/> 120"	_____
<input type="checkbox"/> MEDIUMDUTY			

NOSE QTY. _____ None

<input type="checkbox"/> BLUEFIRE (Asphalt)	<input type="checkbox"/> 1/4"	<input type="checkbox"/> 24"
<input type="checkbox"/> BLUEICE	<input type="checkbox"/> 3/8"	<input type="checkbox"/> 48"
<input type="checkbox"/> MEDIUMDUTY	<input type="checkbox"/> 1/2"	
<input type="checkbox"/> SUPERFINE	<input type="checkbox"/> Kit Complete	<input type="checkbox"/> Material Only

SIDES QTY. _____ None

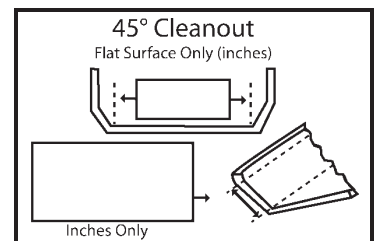
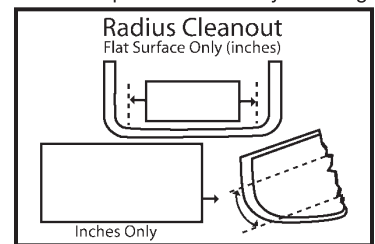
<input type="checkbox"/> BLUEFIRE (Asphalt)	<input type="checkbox"/> 1/4"	<input type="checkbox"/> 24"
<input type="checkbox"/> BLUEICE	<input type="checkbox"/> 3/8"	<input type="checkbox"/> 48"
<input type="checkbox"/> MEDIUMDUTY	<input type="checkbox"/> 1/2"	
<input type="checkbox"/> SUPERFINE	<input type="checkbox"/> Kit Complete	<input type="checkbox"/> Material Only

TAIL-GATE QTY. _____ None

<input type="checkbox"/> BLUEFIRE (Asphalt)	<input type="checkbox"/> 1/4"	<input type="checkbox"/> 24"
<input type="checkbox"/> BLUEICE	<input type="checkbox"/> 3/8"	<input type="checkbox"/> 48"
<input type="checkbox"/> MEDIUMDUTY	<input type="checkbox"/> 1/2"	
<input type="checkbox"/> SUPERFINE	<input type="checkbox"/> Kit Complete	<input type="checkbox"/> Material Only

Select Appropriate Body Shape

Must complete for Warranty Tracking



I confirm that the above specifications and measurements are accurate and complete.

Signature: _____ Date: _____ Print Name: _____