

MEASUREMENT GUIDE

Date: _____

Company Name: _____ Phone: _____

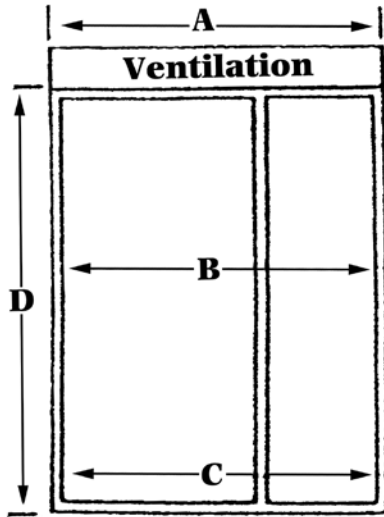
Contact Name: _____ Fax: _____

P.O.# _____ Quantity: _____ Shower Head

Metal Color: _____ Glass Color: _____

Hinge _____ Extras: _____

Shower Door with Inline Side Panel



EHDPK/EHD2PK

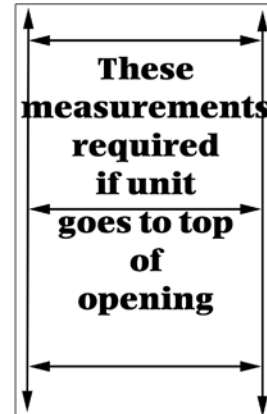
A

B

C

D

D



Measurements must be exact if the unit is full height and for steam unit.

(Can be hinged off panel or wall.)

PHONE
1-800-842-3205

GLASS*Source*

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1-616-842-2157

Email: orders@glassource.net