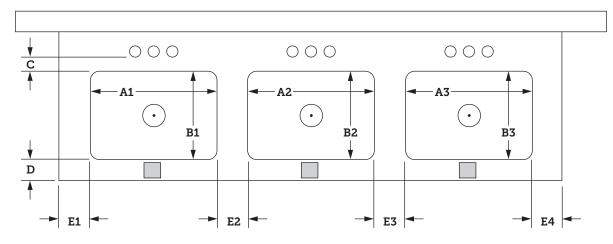
# ROCESSING Dimensional Request Form

## **STEP 1**: Contact Information

| Facility Name | Facility Contact |
|---------------|------------------|
| Phone Number  | Email Address    |

### STEP 2: Check off which bays the inserts would be used in



### **STEP 3**: Provide sink measurements as indicated on the drawing and write them in the space below.

| MEASUREMENT | SINK 1 | SINK 2 | SINK 3 |
|-------------|--------|--------|--------|
| Α           |        |        |        |
| В           |        |        |        |
| С           |        |        |        |
| D           |        |        |        |
| E1          |        |        |        |
| E2          |        |        |        |
| E3          |        |        |        |
| E4          |        |        |        |
| Depth       |        |        |        |
|             |        |        |        |

### STEP 4: Take 3-4 photos of the entire sink and faucets, including at least 1, top-down view.

To be filled out by a Pure Processing service manager

Trimming

Signature

Email this document to sales@pure-processing.com (P 877-718-6868)