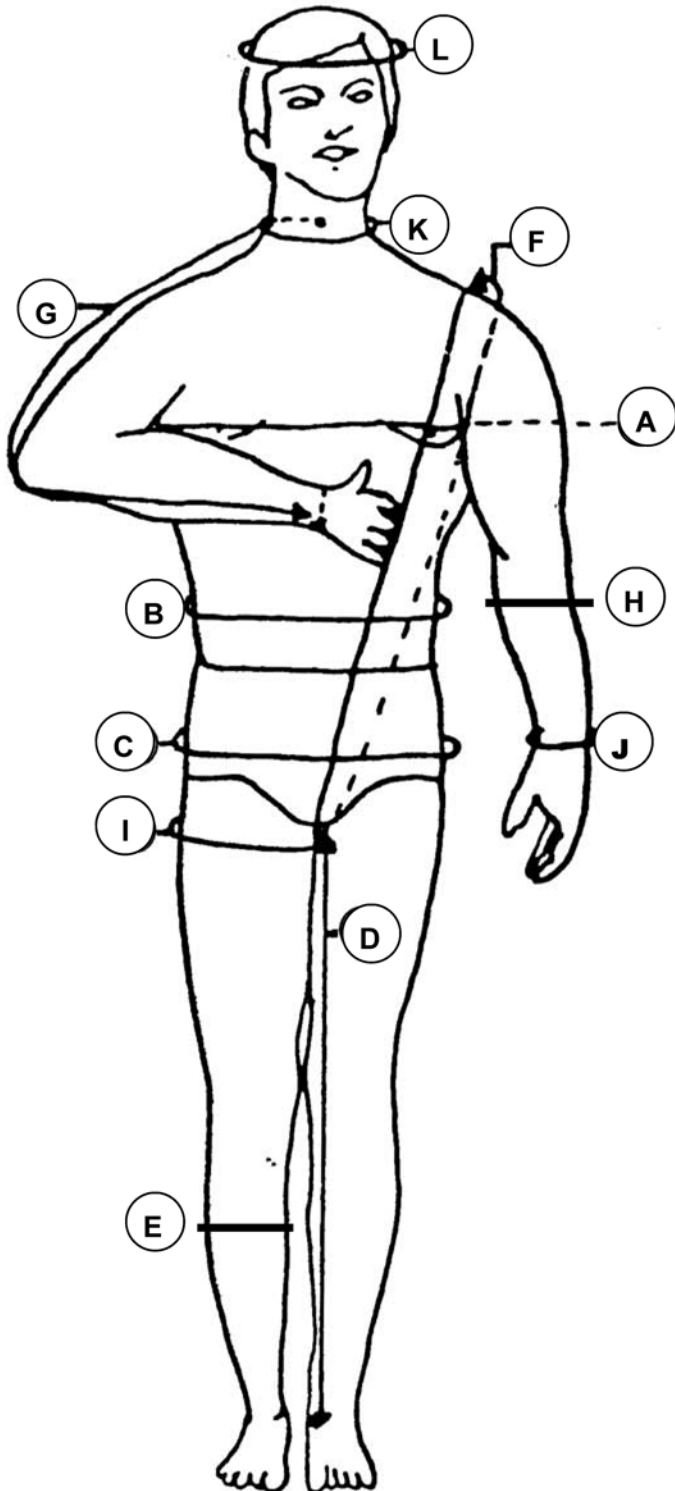




Under Sea Industrial Apparel

1600 Railroad Ave ■ PO Box 1071 ■ St Helens, OR 97051 ■ www.usia.com
 800-247-8070 ■ 503-366-0212 ■ Fax: 503-366-0816 ■ sales@usia.com

CUSTOM ORDER DATA FORM	
DEALER NAME:	
CONTACT:	
PHONE:	FAX:
CUSTOMER NAME:	P.O. NO.
PRODUCT:	COLOR:
SPECIAL FEATURES, ADDITIONS ie..large belly, big hips, relief zipper, pocket, etc..."	



MEASURE CAREFULLY TAKE ALL MEASUREMENTS AT WIDEST POINT

Height: _____ Weight: _____

A. _____ **Chest** (Across nipples taking a deep breath)

B. _____ **Waist** (The beltline)

C. _____ **Hip** (Across the largest portion)

D. _____ **Inseam** (From the crotch to the ankle bone)

E. _____ **Calf**

F. _____ **Torso** (Take measurement from center of the shoulder through the crotch and back to shoulder. Have customer shrug their shoulders)

G. _____ **Sleeve Length** (Hold arm out, bend at 90 degrees. Measure from center of back of neck Outside of elbow, to top of wrist bone)

H. _____ **Forearm**

I. _____ **Thigh** (Measure at the largest point)

J. _____ **Wrist** K. _____ **Neck**

L. _____ **Head** M. _____ **Shoe**

Suit Fit: Loose: _____ Fitted: _____

I AUTHORIZE CONSTRUCTION OF A CUSTOM SUIT AND ACCEPT FULL RESPONSIBILITY FOR THE ACCURACY OF ALL PERTINENT INFORMATION.

DEALER _____

DATE _____

CUSTOMER _____

DATE _____