

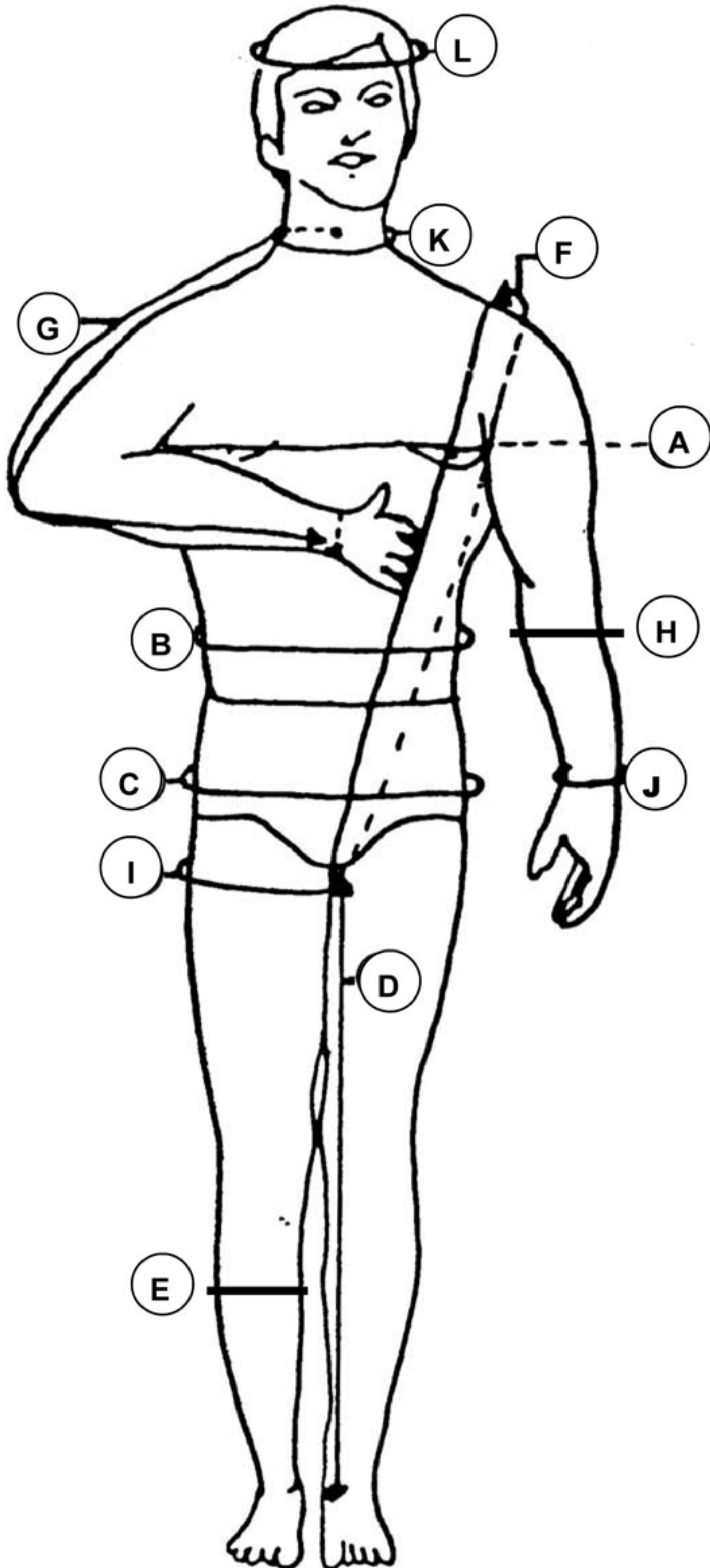


Under Sea Industrial Apparel

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DRY SUIT CUSTOM FORM

| 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