

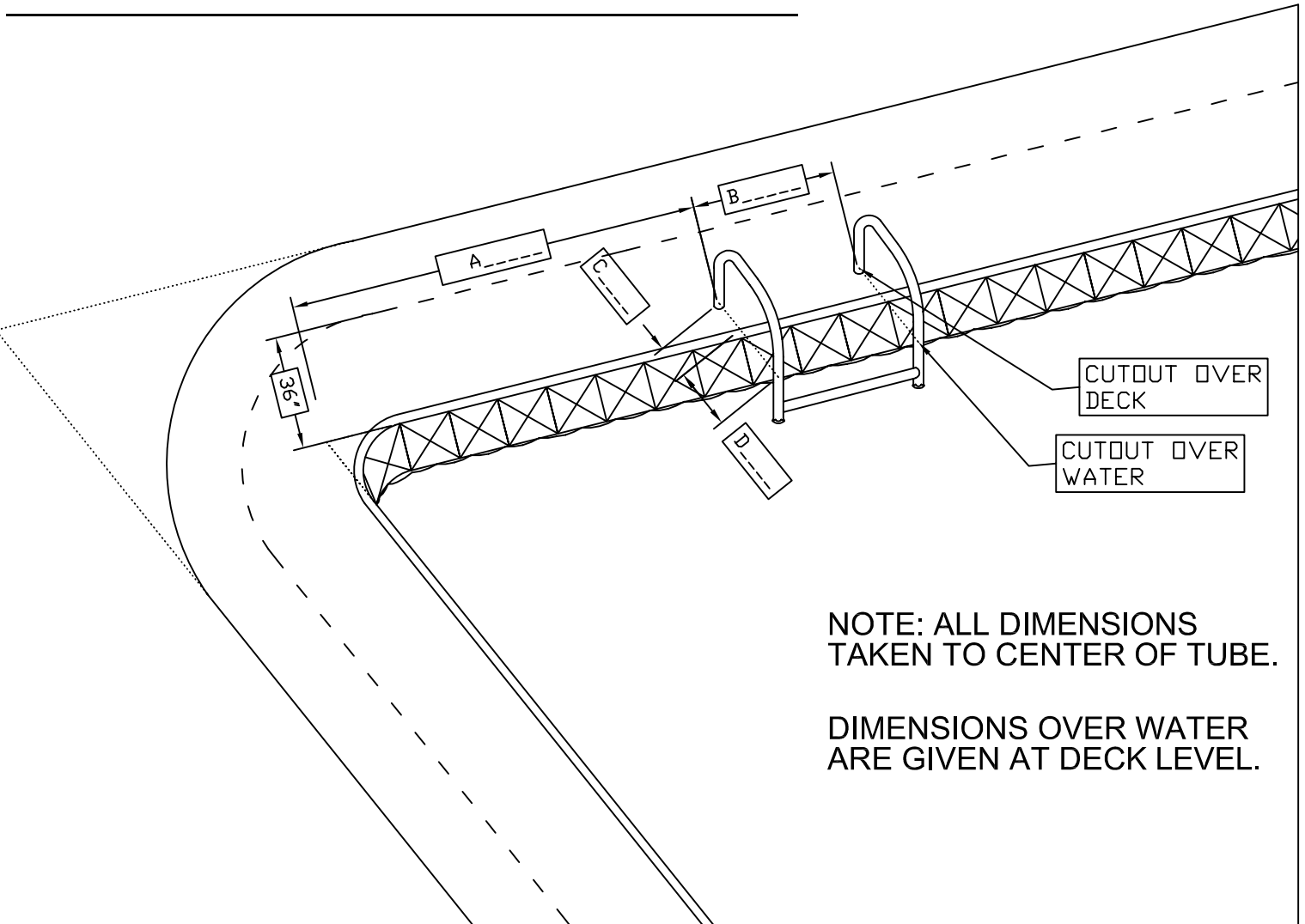
DEALER NAME : _____



JOB NAME : _____

**FOR USE WHEN COVER MUST BE CUTOUT FOR
NON-REMOVABLE OBSTACLES (LADDER OR HAND RAILS)
OVER DECK OR OVER WATER.**

COMMENTS : _____



OBSTACLE # _____ (EXAMPLE 1 OF 2, 2 OF 2 ETC.)

USE A SEPERATE SHEET FOR EA. OBSTACLE

- A _____
- B _____
- C _____
- D _____