

AVALON WORKSHEET FOR THE PRECUT SAUNA PACKAGE

(IMPORTANT: Completed worksheet must be signed and returned before order will be manufactured)

QUOTE or ORDER (Check one)

DATE _____
 COMPANY NAME SAUNA WAREHOUSE
 YOUR NAME _____
 ADDRESS 6 Orchard, Ste. 201
LAKE FOREST, CA 92630
 PHONE # (800) 906-2242 FAX # (949) 699-0830
 QUOTE # _____ P.O.# _____

SHIP TO:
 NAME _____
 ADDRESS _____
 PHONE # () _____
 FAX # () _____

Please supply the following information **AFTER** framing regardless if the room is standard or a custom size.

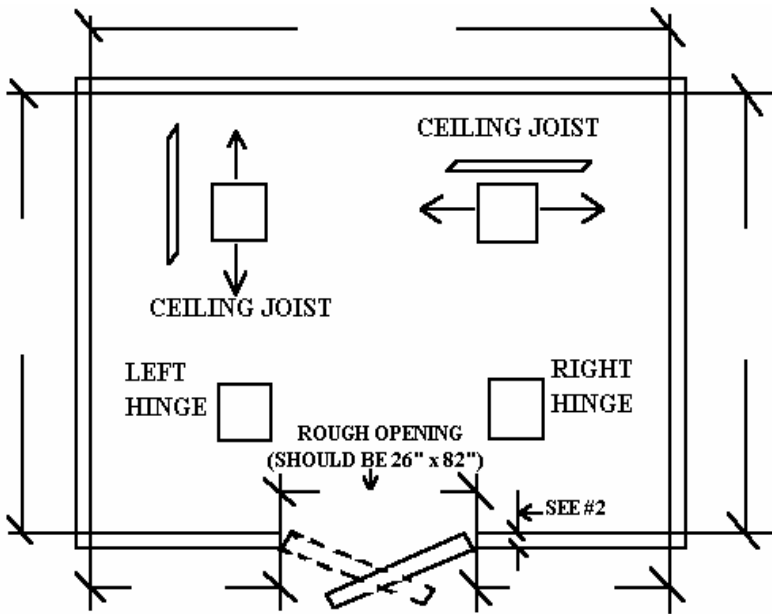
BOARDS ARE CUT FOR HORIZONTAL INSTALLATION.

(*) Indicates Additional cost

PLEASE INDICATE FINAL INTERIOR MEASUREMENTS ON THE SKETCH BELOW

Final measurements should be from stud to stud if room is framed with wood, or nailer to nailer if room is framed with metal studs. NOTE: We do not make any allowances for additional nailers or drywall, exact final dimensions are the responsibility of the person signing form.

(or, draw your own sketch on the back of this paper.)



- 1) Ceiling Height _____
 _____ Recommended height 7' 0",
 Minimum 6' 2". (*)Over 7'
- 2) Total wall thickness (framing + drywall + our 3/4")
 = _____ Total Jamb (*) Over 5 1/4"
 Door Rough Opening = _____
- 3) POWER SUPPLY AT JOBSITE IS: 240v, 1ph
 208v, 3ph 208v, 1ph
- 4) AVALON HEATER INFORMATION:
 Heater Model: _____
 Control: _____ Contactor: _____
- 5) INTERIOR WOOD:
 Western Red Cedar (Standard)

- 6) Fill in exact **inside measurements** of **each wall** and **each side of door** in spaces provided.
- 7) Check the **direction** of **YOUR ceiling joists** in the box provided.
- 8) Standing outside the room and facing the door (door must open out toward you) do you want the hinge on **left** or **right**? **Check box.**
- 9) By drawing an **H** indicate the location for the Sauna heater. Is the wiring installed **YES** or **NO**. (circle one)
- 10) Type C building foil (added Vapor Barrier) included in package.
- 11) Additional information _____

12) Please specify Glass Choice: Clear (Standard) Obscure* Grey*

13) Please sign and return this form to:
 (949) 699-0830 FAX

 (SIGNATURE)