



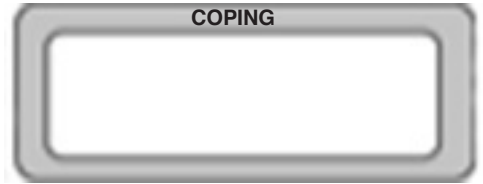
AQUATIC ACCESS INC.

DIMENSIONAL WORKSHEET for IN-GROUND Pools/Spas

PLEASE COMPLETE A DIMENSIONAL WORKSHEET FOR EACH LIFT/LOCATION.

Remember to allow open space between the lift and the pool corner or other obstruction to the lift's rotation (a minimum of 36" needed for all IGAT models), as well as room for any mobility device beside the lift. Always confirm lift and socket location with Aquatic Access engineers or instruction manual before installing.

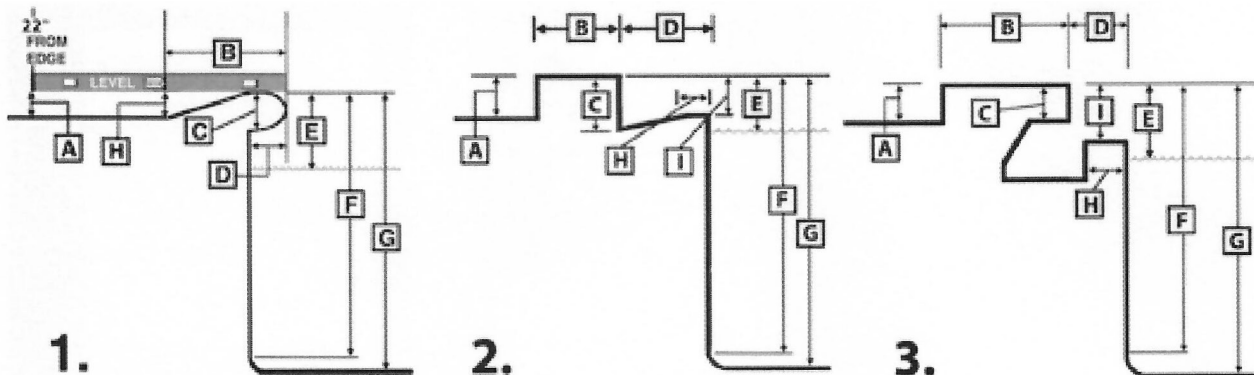
Draw in desired location and seat rotation of lift on this drawing. If shape differs, provide your own sketch. Indicate location of any steps, lights, ladders, benches, handrails or other obstructions to lift rotation on deck or within pool walls.



1. Verify with a carpenter's level (see illustration below) the amount of deck's slope at 22" from pool edge. _____
2. What is the composition of the deck around the pool and the pool wall? _____
3. Is there a vinyl liner in the pool? YES NO
4. Is the pool deck on a solid foundation? YES NO If no, provide cross-section details on separate page.
5. Does the pool have a pool cover? YES NO If yes, provide cross section details on separate page.
6. Is the pool located indoors? YES NO If yes, how high is the ceiling? _____
7. Is the location on city water? YES NO What is the water pressure? _____ PSI
8. Is the pool filled with salt water? YES NO
9. What is the weight of the heaviest user of the lift? _____
10. Choose the color of the lift's seat. WHITE BLUE
11. Armrests -- For Side-Facing Seats, one stationary cylinder-side armrest, and one flip-up outer armrest are standard. For Front-Facing Seats (ylinder behind seat), two stationary armrests are standard. Other configurations, or no armrests can be ordered.

DIMENSIONAL INFORMATION REQUIRED FOR IN-GROUND POOLS

Select the pool profile drawing that best matches your pool below and fill in the requested measurements. If none of these profiles represent your pool, please make a detailed sketch with the pertinent measurements.



PROFILE # _____ A= _____ B= _____ C= _____ D= _____ E= _____ F= _____ G= _____ H= _____ I= _____

A = 0 For a Level Deck

Contact Person _____ Company Name _____

Address _____

Ph. _____ Fax _____ E-Mail _____

Email: CustomerService@AquaticAccess.com MAIL OR FAX COMPLETED FORM TO:

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