



COVER DOCTORS® SAFETY COVER RA FORM

Please provide the following information for existing (old) cover being returned.

STEP 1: SHIP BOX FOR RA COVER TO

Name:		
Address:		Phone:
City:	State:	Zip:

STEP 2: DISTRIBUTOR AND DEALER CONTACT INFORMATION

Distributor Name / Location:		
Distributor Contact:	Email:	Phone:
Dealer Name:		
Dealer Address:		
City:	State:	Zip:
Dealer Email:	Phone:	Fax:
Consumer Tag Name:		

STEP 3: TYPE OF WORK TO BE PERFORMED

<input type="checkbox"/> TEMPLATE REMAKE	<input type="checkbox"/> OTHER (Please Explain)
<input type="checkbox"/> REPAIR - Select those that apply (if known): <input type="checkbox"/> Holes smaller than 4" <input type="checkbox"/> Add Drain <input type="checkbox"/> Chaffing strap replacement <input type="checkbox"/> Holes larger than 4" <input type="checkbox"/> Remove Drain <input type="checkbox"/> Webbing replacement <input type="checkbox"/> Add Step <input type="checkbox"/> Cap cut-out <input type="checkbox"/> Snap-hook replacement <input type="checkbox"/> Remove Step <input type="checkbox"/> Add cut-out <input type="checkbox"/> OTHER:	

Note: If GLI manufactured this cover previously and you have the original PO#, SO# or Serial #, please contact our customer service department with this information. It is not necessary to return the old cover if you can provide the original cover identification.

STEP 4: POOL SIZE

Overall pool length (at longest point):	Overall pool width (at widest point):	Pool Shape:
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Note: Old covers can shrink or stretch over time. It is very important to provide overall length and width of pool to help us determine shrink factor of your old cover. Failure to provide this information may result in a data hold.

STEP 5: INFORMATION ABOUT EXISTING (OLD) COVER BEING RETURNED

Color:		
Material Type:	<input type="checkbox"/> Mesh	<input type="checkbox"/> Solid

STEP 6: IF RETURNING AN EXISTING COVER FOR A REMAKE, PLEASE INDICATE WHAT TO DO WITH THE OLD COVER ONCE THE NEW COVER IS MANUFACTURED

<input type="checkbox"/> Discard old cover at - NO CHARGE	<input type="checkbox"/> Ship old cover back with new cover. A \$80.00 charge will be applied for shipping of old cover.
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Note: If no box is checked above, GLI will automatically discard old cover when new cover is complete.

**STEP 7: FAX SAFETY COVER RA FORM TO 330-744-1228
OR EMAIL TO RA@GLIPOOLPRODUCTS.COM.**