

Name of Distributor:	Date:
Phone Number:	Fax Number:
Contact:	Email:
Dealer/Builder Name:	Contact:
Phone Number:	Project Name:
Email completed form to Customrail@sa	ftron.com or fax to 941-751-2802
RTD HANDRAIL PATTERN: 3 Bend 4 Bend All dimensions should be indicated in inches and REQUIR	☐ Cross Braced ☐ Cross-Braced Dip Rail RE the following information using CENTERLINE dimensions:
\blacktriangle = Top Span (for 4 Bend Return to Deck F	landrail Only)
B = Dimension from the Bottom of Leg to *Include amount needed for embedment C = Dimension from the bottom of the leg *Include amount needed for embedment D = Centerline Dimension between the De	g to the enterline of the lowest horizontal span*
* Please note; Non Cross-Brace RTD not to exc. * MUST BE COMPLETED TO QUOTE: □ Residential II	
COLOR: White Gray Beige Taupe	e 🔲 Black 🔲 Graphite Gray
NOTES: Anchor Sockets Not Included B C C L D A A A A C L D A A C C L D A C C L D A C C L D A C C L D A C C L D A C C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D A C L D D A C D D A C D D D D D D D D D D D D	
This form will be required to be signed and sent with P considered final and approved for production. Custom Please check box if you request a shop drawing for considered.	pool rails and ladders are not returnable.
considered final and approved for production. Custom	pool rails and ladders are not returnable.

Date

Company