

LAYOUT TYPE Between Walls

1

Please show us on the overhead layout below how your current toilet partitions are configured.
 Please fill in measurements and show us any changes that you would like to make.

TOTAL WIDTH

2

WIDTH

DEPTH

*Want to change the way the door swings?
 Please draw the doors in by hand

3

Choose Material:

- ☐ Powder Coated Steel
- ☐ Phenolic ☐ Stainless Steel
- ☐ Solid Plastic ☐ Plastic Laminate

4

Options:

- ☐ Handicapped Stalls if so, how many? (____)
- ☐ Continuous Brackets
- ☐ Continuous Hinges

5

Mounting Style:



☐ Floor to Ceiling



☐ Floor Mounted



☐ Overhead Braced



☐ Ceiling Hung

6

Name: _____ Company Name: _____
 Phone: _____ Email: _____
 Address: _____
 City: _____ State: _____ Zipcode: _____ Need Partitions By: _____