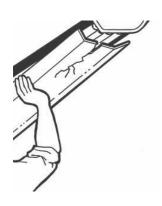
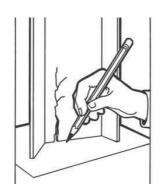


Please trace the profile of your wrap lens as shown





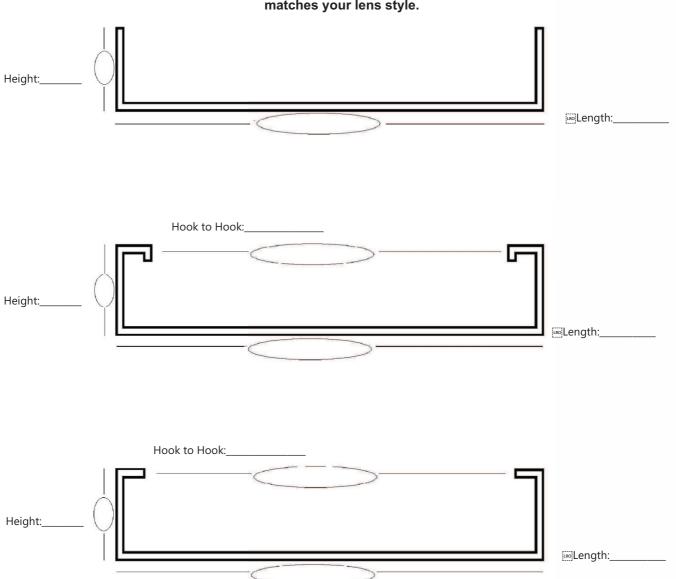
Note all dimensions including width, depth, and length.

Lens Color: ☐ **WHITE** ☐ **CLEAR PRISMATIC** Mark appropriate box with an "X"

*IF YOUR LENS HAS END CAPS, PLEASE TRACE THE END CAP NOTING ALL DIMENSIONS AND COLOR

Email or Fax your sketch to Indiana Electrical Sales sales@indianaelectricalsales.com or (F) (317)-782-8577

If you have a "common straight sided" lens per below, please fill out the dimensions of the profile that best matches your lens style.



Name:
Company Name:
Quantity:
Phone:
Fax:
Email:
Notes/Comments: