

Measurement form

Name of model: _____

Wingspan: _____

Manufacturer/Brand: _____

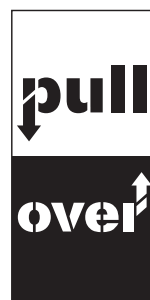
Name of customer: _____

Street: _____

Post Code/City: _____

Phone: _____

E-mail: _____



™ **pull-over-products**

Simen + Nonnast
Lindenstr.37
D-73230 Kirchheim
Telefon 07021-482432
Telefax 07021-482437

E-mail
info@pull-over-products.com

Internet
www.pull-over-products.com

Ust-IdNr.
DE 231683326

Handelsregister
Stuttgart
HRA 231183

Essential measurements:

1. Wing:

- maximum airfoil thickness at wing root _____ cm
- circumference at wingroot _____ cm
- maximum airfoil thickness at wing tip _____ cm
- circumference at wingtip _____ cm
- maximum height of servo arms above wing surface _____ cm
- distance between handle position and wing root _____ cm

2. Elevator:

- maximum section thickness at empennage root _____ cm
- circumference at empennage root _____ cm
- maximum section thickness at empennage tail _____ cm
- circumference at empennage tail _____ cm
- maximum height of servo arms above elevator surface _____ cm

3. Rudder:

- circumference of the fuselage at the front end of your sketch _____ cm
- maximum height of servo arms above rudder surface _____ cm

4. Other distinctive features:

Please note that all bags will be made on the basis of your data! So ensure the correctness of the measures.

Hereby I confirm the accuracy of the measurements as specified above.

Date: _____ Signature: _____