



Work Order Request ALTERATIONS

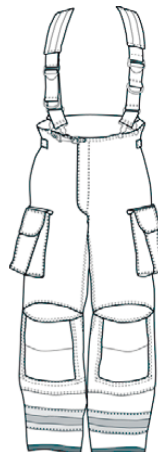
Please fill form out completely and include with gear.

SOUTH CAMPUS 5004 SE JOHNSON CREEK BLVD MILWAUKIE, OR 97222 (503)-775-2114	NORTH CAMPUS 8320 S. 208 TH ST., SUITE H111 KENT, WA 98032 (253)-277-4131
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TODAY'S DATE:		DATE NEEDED BY:
Station/Fire Department Name/#:		
Firefighter Name:		
Purchase Order#: (if applicable)		



COAT



PANT

- | | |
|---|---|
| <input type="checkbox"/> LENGTHEN SLEEVE ____ INCHES (LIMIT 4") | <input type="checkbox"/> LENGTHEN LEGS ____ INCHES (LIMIT 4") |
| <input type="checkbox"/> SHORTEN SLEEVE ____ INCHES (LIMIT 4") | <input type="checkbox"/> SHORTEN LEGS ____ INCHES (LIMIT 4") |
| <input type="checkbox"/> REPLACE WRISTLETS OF COAT:
Standard 4" ____ w/Thumb holes 8" ____ | <input type="checkbox"/> TAKE-IN WAIST ____ INCHES (LIMIT 4") |
| <input type="checkbox"/> ADD MIC TAB (give details below) | <input type="checkbox"/> LET-OUT WAIST ____ INCHES (LIMIT 4") |
| <input type="checkbox"/> ADD POCKET(S) (give details below) | <input type="checkbox"/> ADD POCKET(S) (give details below) |
| <input type="checkbox"/> ADD ACCESSORY STRAP (give details below) | |

Use diagram to show details/Explain Special Instructions:
