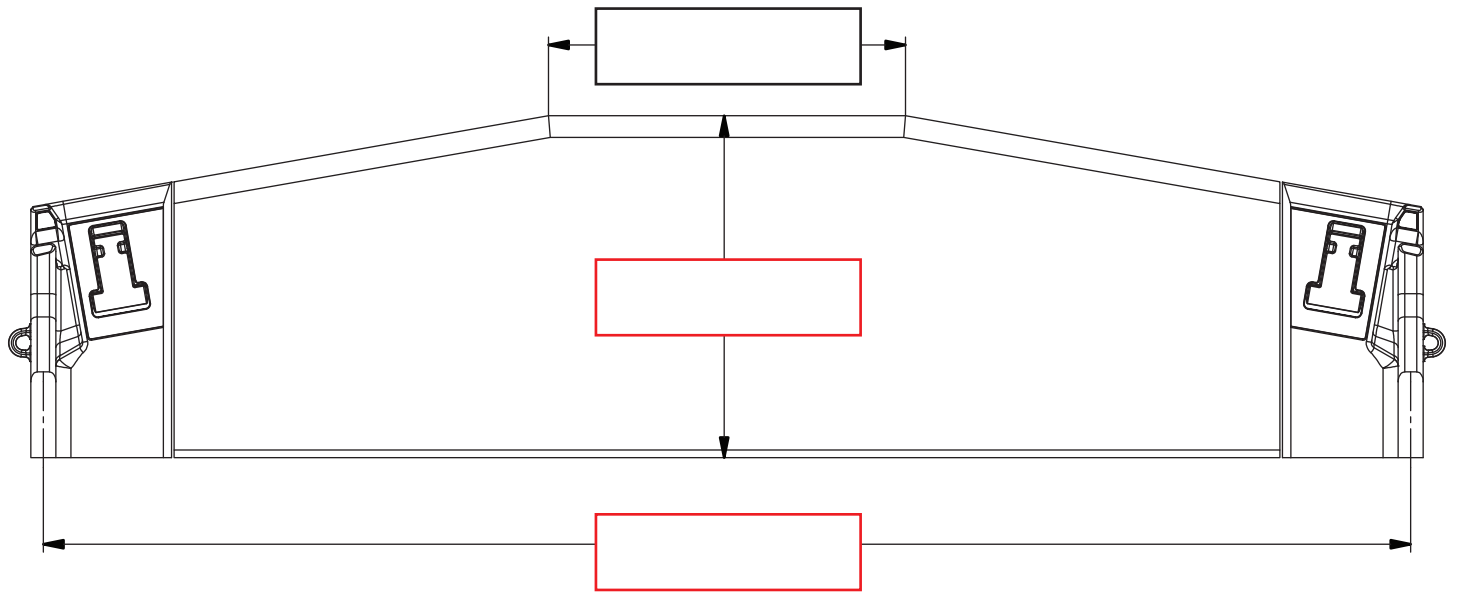


Request By:	<input style="width: 95%;" type="text"/>	Date:	<input style="width: 95%;" type="text"/>
Machine Brand:	<input style="width: 95%;" type="text"/>	Machine Model:	<input style="width: 95%;" type="text"/>
Bucket Size:	<input style="width: 45%;" type="text"/> <input style="width: 45%;" type="text"/>	Measurement Dimensions:	<input style="width: 95%;" type="text"/>
Lip Style:	<input type="checkbox"/> Full Spade	<input type="checkbox"/> Semi Spade	<input type="checkbox"/> No Spade
Lip Plate:	<input type="checkbox"/> 50mm	<input type="checkbox"/> 70mm	
Interlock Bars:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Lip Dimensions

Please measure and mark down dimensions indicated.
Critical dimensions required are indicated by a **RED** box.



Comments:

Document Version Control		
Document Name	Version by year	Release Date
Lip Drawing Request Form BPX Underground	2023	28/02/2023