

## **OPENING CHECKLIST**

NAME:	POOL SIZE:				
		OF WATER)			
ADDRESS:	OPENING DATE:				
TOWN:	EMAIL:	·			
ZIP CODE::	GATE/SHED LOCK COMBO:				
HOME #:	CELL #:	WORK #:			
OPENING OPTIONS- & ONE					
COMPLETE OPENING	OPENING WITHOUT	OPEN FILTER			
INCLUDING COVER REMOV	VAL 'L COVER 'L	J SYSTEM ONLY L			
COVER STYLE: LOOP-LO SAFETY	OC LIGHTWEIGHT W/ WATER BAGS	OTHER			
WHERE WOULD YOU LIKE YO	OUR COVER STORED?				
WHERE WOULD YOU LIKE YO	OUR CHEMICAL STORED?				
WHERE ARE YOUR FILTER PA	ARTS & DECK EQUIP?				
	LEVEL TO THE MIDDLE OF SKIMMER?				
WILL YOU HAVE THE ELECTR	ICITY TO THE FILTER AREA TURNED ON	? YES NO			
DO YOU HAVE A HEATER? Y	ES / NO PROPANE L NATURAL L	ARE THE TANKS FULL? YES / NO			
HOW MANY BAGS OF 25# EARTH DO Y ONLY FOR EARTH FILTER	OU NEED? 1 2 DO YOU HAVE A SAI	ND FILTER? YES / NO			
SU	JSTAIN USERS ONLY- CIRCLE (	CHOICE			
SUMMER ALGAE SHEILD: 1/2 GAL / 1 QT	ENERGIZER TABLETS (SMALL NUGGETS): 35# / 20#	3" CHLOR TABLETS (PUCKS): 25# / 16#			
1# SHOCK POLICHES: VEC / NO	SLISTAIN AGLAE DESTROVER? VEC / NO	CLICTAIN TECT CTDIDGS VEC / NO			

NON SUSTAIN USERS- CIRCLE CHOICE



## **ADDITIONAL WORK/ITEMS NEEDED?**

## **ADD SPECIAL INSTRUCTIONS HERE**


## **QUESTIONS?**

CONTACT US AT 860-628-6669 OR EMAIL US BRENNANPOOLSCT@GMAIL.COM

**THANK YOU!**