



Date:

UPPER - BOTTOM ORDER FORM

Company Name: _____ Branch: _____ Shoe clinician: _____

Mr. Mrs.

Last No.: _____ Order No.: _____ Client name: _____

With last or inlays adjustments*: _____ No adjustments: _____ * supply new inlay or last form

Upper

Model number

Upper Height
 Left mm
 Right mm

Model as before
Copy good

Extras

Tongue padding	3mm	5mm
Tongue stiffener	Ercoflex	Renoflex
Ankle padding	3mm	5mm
General heel padding	3mm	5mm
CYS Padding SP155		
Collar padding 5mm	Seamless	Blind stitch
Watertongue		

Upper leather

1	<input type="text"/>
2	<input type="text"/>
3	<input type="text"/>

Lining

Front part	<input type="text"/>	Waterproof
Heel part	<input type="text"/>	No Stitching in Lining
		Anti Allergy glue

Closure Type

As Model

Ring No. Qty Color

Hook No. Qty Color

Velcro without roller buckle SP112 with roller buckle SP110

Width in mm Qty

Adjustable Velcro System SP150

Left	Right
Zipper Med Lat	Med Lat
Elastic Med Lat	Med Lat
Double Zipper/Laces SP122	

Leg circumference:

Le	Height	Ri
<input type="text"/>	550 mm	<input type="text"/>
<input type="text"/>	500 mm	<input type="text"/>
<input type="text"/>	450 mm	<input type="text"/>
<input type="text"/>	400 mm	<input type="text"/>
<input type="text"/>	350 mm	<input type="text"/>
<input type="text"/>	300 mm	<input type="text"/>
<input type="text"/>	250 mm	<input type="text"/>
<input type="text"/>	200 mm	<input type="text"/>
<input type="text"/>	150 mm	<input type="text"/>
<input type="text"/>	100 mm	<input type="text"/>

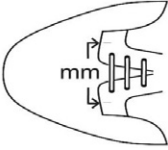
Instep:

Derby style Standard

Instep more to front mm

Instep more to back mm

Distance between quarters mm

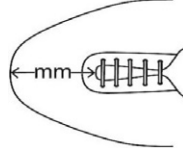


Oxford style Standard

Instep more to front mm

Instep more to back mm

Distance between quarters mm



Remarks:

Bottom

Bottom Style

As model

Other: specify bottom option No.

EVA Shore Soft 35
Medium 50-55
Hard 65-70

Innersole

Polyprop solestiffener H5	Carbon solestiffener 4x
Polyprop solestiffener H2	Carbon solestiffener 6x
	Anti penetration sole

Welt & Outsole

As model

Sole No. Color mm

Edge No. Color

Rocker

Rocker Type No. Medial direction Lateral direction

Rocker measurements

	Heel	Ball	Toe
Standard	5 mm	5 mm	0 mm
Standard	10 mm	10 mm	2 mm
Custom measurements	Left <input type="text"/> mm	<input type="text"/> mm	<input type="text"/> mm
	Right <input type="text"/> mm	<input type="text"/> mm	<input type="text"/> mm

Space sole

General	Left	Right
3 mm	5 mm	3 mm x 2
3 mm x 2	3 mm x 3	5 mm x 2
Under Ball	Left	Right
3 mm	5 mm	3 mm x 2
3 mm x 2	3 mm x 3	5 mm x 2

Heel Height

Left	<input type="text"/> mm	Right	<input type="text"/> mm
------	-------------------------	-------	-------------------------

Heel Options

Heel flare	Med <input type="text"/> mm	Lat <input type="text"/> mm	Back <input type="text"/> mm	Right	Med <input type="text"/> mm	Lat <input type="text"/> mm	Back <input type="text"/> mm
Tapered	Med <input type="text"/> mm	Lat <input type="text"/> mm	Back <input type="text"/> mm	Right	Med <input type="text"/> mm	Lat <input type="text"/> mm	Back <input type="text"/> mm
Buffer standard	or A - B <input type="text"/> mm	standard	or A - B <input type="text"/> mm	Right	standard	or A - B <input type="text"/> mm	standard
Rounding standard	or A - B <input type="text"/> mm	standard	or A - B <input type="text"/> mm	Right	standard	or A - B <input type="text"/> mm	standard
Thomas Heel	Lat <input type="text"/> mm	Med <input type="text"/> mm	Right	Lat <input type="text"/> mm	Med <input type="text"/> mm		

Reinforcement

Counter options Standard

or: Renoflex High reinforce (BLU) No.

Ercoflex Height in mm

Tep Ankle padding in mm

Leather General heel padding in mm

Materials BLU

1st layer	Left <input type="text"/>	Right <input type="text"/>
2nd layer	Left <input type="text"/>	Right <input type="text"/>
3rd layer	Left <input type="text"/>	Right <input type="text"/>

Toe

Type Normal Short Long Wing

Material Tep Steel Polyprop

Ercoflex Aluminium

Lining Carbon

Outlasting

Remove the last Footbed covered with perforated lining Provide extra laces

Remarks: