



**OVERLAP**  
move to space

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## CHECK MEASURE SHEET

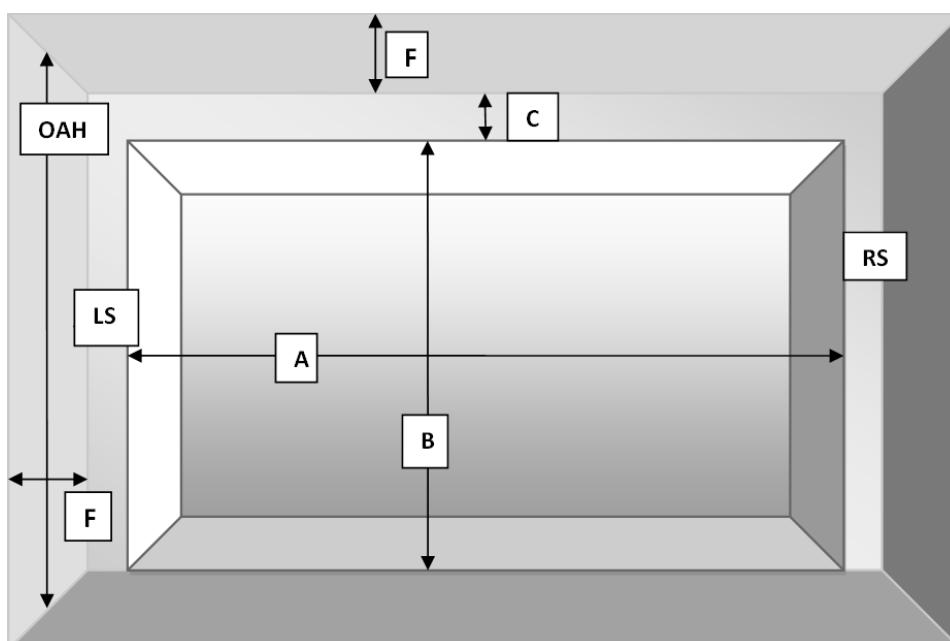
Date: \_\_\_\_\_

Reference: \_\_\_\_\_

Please return this form to [office@scottydoors.com](mailto:office@scottydoors.com)

Please take the sizes from the inside looking out and record in millimetres.

### Regular wall opening



**NB: All measurements to finished openings only**

mm

Additional Notes

A - Daylight Opening Width		
B - Daylight Opening Height		
C - Headroom		
LS - Left Side Clearance		
RS - Right Side Clearance		
OAH - Overall Ceiling Height		
F - Ceiling/Wall Clearance (If restricted)		
Garage with other entrance:	<input type="checkbox"/> YES	<input type="checkbox"/> NO (if NO – External door handle required)
Type of installation:	<input type="checkbox"/> Behind Walls	<input type="checkbox"/> Between Walls

Measured by: \_\_\_\_\_