

SIZING PRO-FORMA

FULL	. NAME:	EMPLOYEE NUMBER:	
	TION NAME .OCATION:		
	TACT IBER:		
EMA ADD	IL RESS:		
I AM A MALE (PLEASE TICK THE APPROPRIATE BOX): REQUIRES 5 MEASUREMENTS REQUIRES 6 MEASUREMENTS			
		GUIDE TO TAKING THE MEASUREMENT (in CM)	
A	HEIGHT	Crown of head to floor	9
В	CHEST	Circumference of fullest part (both arms down relaxed a side)	
C	WAIST	Circumference of natural waistline between lowest rib and hip bone	
D	INSIDE LEG	Crotch to floor	
E	SLEEVE LENGTH	End of shoulder bone to outer wrist bone (arm relaxed at side)	
F	HIP	Circumference of fullest part - about 200mm below the natural waistline	
		00 90	
SIZ	ING SUPERVISOR SIGNA	RE	

Scan and email to info@paccare.com.au | Fax to (07) 3441 7177
Please retain a copy of this form for your records.



FIREFIGHTER'S SIGNATURE

SCAN THIS QR CODE WITH YOUR PHONE FOR A VIDEO PRESENTATION ON HOW TO ACCURATELY MEASURE A FIREFIGHTER FOR THEIR BRISTOL STRUCTURAL ENSEMBLE

TIME AND CARE SHOULD BE TAKEN TO ACCURATELY COMPLETE THE MEASUREMENT PROCESS AND FILL OUT THIS SIZING PRO-FORMA TO ACHIEVE THE BEST POSSIBLE FIT.