



SURVIVAL ARMOR®

MALE BODY ARMOR MEASUREMENTS

PH: 866-868-5001 FX: 239-210-0898

IMPORTANT WHEN USING SIZING VESTS OR IF VEST IS GIVEN A SIZE AT THE TIME OF MEASURING.

Requested size: Front width _____ Length _____

Requested size: Back width _____ Length _____

Measured by: _____ Date: _____

PLEASE READ BEFORE TAKING MEASUREMENTS

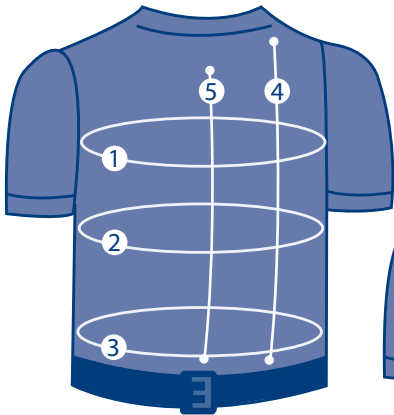
1. Have another person measure you.
2. Please complete all information and be accurate; the fit of your vest depends on it
3. Wear the attire you will wear with the vest when being measured (i.e., uniform, T-shirt, service duty belt, etc.)
4. Side coverage preference: a) ½" gap; b) butt fit; c) 1" overlap; d) 2" overlap; e) other _____
5. Please list any special requirement comments: (i.e., special duties, bike patrol, K-9 unit, etc.)
6. Plainclothes Officer, or no duty belt worn, please check here

Comments: _____

HEIGHT: _____ ft. _____ ins. WEIGHT: _____ lbs. PANTS INSEAM: _____ ins.

Vest Model _____ Threat Level _____ Carrier Color _____

Plate _____ Additional Carriers _____ Tails Yes No



Front Measurement

SEE LOCATION MEASUREMENTS ON FIGURES



Back Measurement

1. FULL CHEST

(Use a cloth tape measure.) Measure completely around the chest directly under the armpits, meeting in the front. _____ ins.

2. MID-ABDOMINAL

Measure completely around the fullest part of the abdominal area meeting in the center of abdominals. (Relax your stomach) _____ ins.

3. WAIST

(Use a cloth tape measure.) Follow a line above and parallel to the top of your duty belt around the entire waist. _____ ins.

4. CLAVICLE-TO-BELT BUCKLE

(Use a cloth tape measure.) Place tape end at top edge of clavicle and measure straight down to the top edge of duty belt.

Standing _____ ins. Sitting _____ ins.

5. FRONT STERNUM

(Use a cloth tape measure.) Place the end of the tape at second button on uniform shirt and measure straight down to the top edge of the duty belt. Stay relaxed. Do not suck in.

Standing _____ ins. Sitting _____ ins.

6. BACK

(Use a cloth tape measure.) Place tape at bottom edge of uniform shirt collar. Measure straight down to top edge of duty belt.

Standing _____ ins. Sitting _____ ins.

PLEASE PRINT

FULL NAME _____

DEPARTMENT _____

BADGE OR ID NUMBER (if used) _____

TELEPHONE NO. _____

EMAIL ADDRESS _____

SHIPPING ADDRESS _____

CITY _____ STATE _____ ZIP _____

DISTRIBUTOR'S NAME _____

OFFICER'S SIGNATURE _____