

# VAPORA F2

60" x 36" x 22 3/4" Bathtub



## OPTIONS

| SYSTEM               | SIZE    | COLOR | CONFIGURATION |
|----------------------|---------|-------|---------------|
| Activ-Air            | 60 x 36 | White | End           |
| Mass-Air             | 66 x 36 |       |               |
| Mass-Air & Activ-Air | 72 x 36 |       |               |
| Soaker - no system   |         |       |               |

## FEATURES

- Acrylic surface resistant to stains and discoloration
- High-gloss finish adds luxurious look to your bathroom
- 2-piece bathtub for an easy installation
- Freestanding bathtub that allows more flexibility

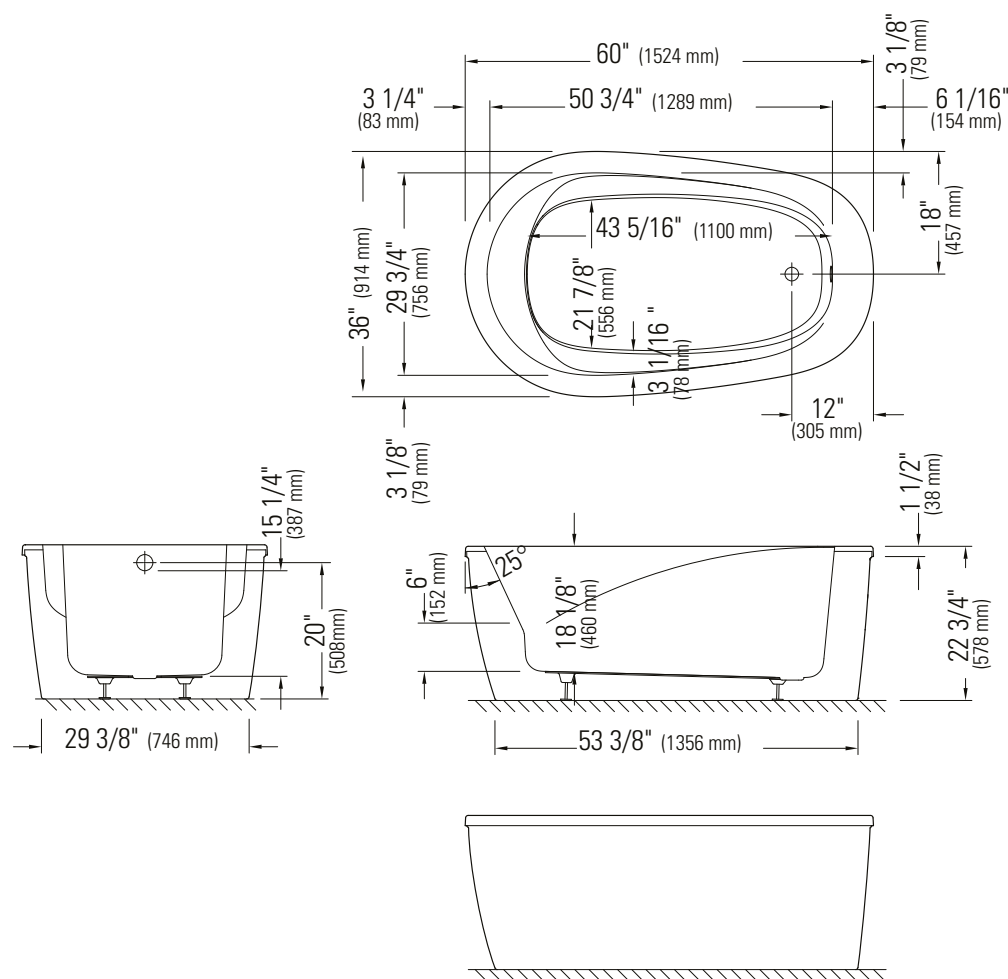
## ATTRIBUTES

- Installation Type : Freestanding
- Above-the-Floor Rough : No
- Material : Acrylic
- Number of Pieces : One
- Residential Warranty : 25 Years



## 60" x 36" x 22 3/4" Bathtub

Produits Neptune

**VAPORA F2 3660**

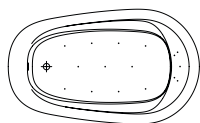
\*A bathtub fitted with back jets can cause the pump to protrude by approximately 3" from the overall dimension.

\*\*All dimensions are approximate and subject to change without notice. Please refer to the installation guide before beginning the installation

### DIMENSIONS

| PRODUCT LENGTH   | BATHING WELL LENGTH | PRODUCT WIDTH  | BATHING WELL WIDTH | PRODUCT HEIGHT |
|------------------|---------------------|----------------|--------------------|----------------|
| 60"              | 43.3175"            | 36"            | 21 7/8"            | 22 3/4"        |
| DEEP SUMP HEIGHT | THRESHOLD WIDTH     | DECK WIDTH     | SKIRT HEIGHT       | WEIGHT         |
| 15 1/4"          | 3 1/8"              | 6 1/16"        | 21 1/4"            | 96 Lbs         |
| DRAIN CLEARANCE  | SHIPPING LENGTH     | SHIPPING WIDTH | SHIPPING HEIGHT    |                |
| 1"               | 67"                 | 36 1/2"        | 24 1/2"            |                |

### SYSTEMS



#### Mass-Air

Included: 16 (11-5) injectors, Optima blower 750W (1 1/2 h.p.) with 300W heating element, 6' blower hose extension and backlit electronic control.

Project: \_\_\_\_\_

Contractor: \_\_\_\_\_

Representative: \_\_\_\_\_

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

Tel: \_\_\_\_\_

Notes: \_\_\_\_\_

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