



ORDER FORM (fax to : 413 - 587 - 4609)

Name: _____ **Title/Dept:** _____

Company: _____ **email:** _____

Billing address: _____

Shipping address: _____

Phone: _____ **Fax:** _____

Dipwell:	6"	10"	15"	18"	install kit	parts
quantity:	_____	_____	_____	_____	_____	_____
Delivery date:	_____					
Freight charges:	_____					
Form of payment:	_____					
card #	_____				exp date:	_____
Name on card:	_____					

Approved by: _____ **Date:** _____