

## **EQUIPMENT ORDER FORM**

DATE:	SHIP TO:
COMPANY:	ADDRESS:
ADDRESS:	
	CITY:
CITY:	STATE:ZIPCODE:
STATE: ZIPCODE:	COUNTRY:
COUNTRY:	CONTACT:
CONTACT:	PH: FAX:
PH: FAX:	EMAIL:
MOBILE:OTHER:	
EMAIL:	SPECIAL INSTRUSTIONS:
FINAL DESTINATION COUNTRY:	
PAYMENT VIA:	
□ CREDIT CARD	
□ WIRE TRANSFER	
□ СНЕСК	

## We accept Visa, Mastercard & American Express

## **EQUIPMENT**

Qty	Brand	Model	Description	Electrical	Gas type

Please complete the form and email back to us to info@totalequipmentsuppliers.com or fax to 305-718-9505. Upon receipt, we will contact you within within one business day to confirm your order and shipping details.