

SHORT ORDER FORM

Division of **INDUSTROMART**

A ZAENTZ Company

Once the Order Form is completed,
E-MAIL it to our
ORDER ENTRY DEPT.

at

industromart@zaentzco.com

Date _____ PO # if needed _____ Buyer 's Contact Name _____

Sold To _____

Address: _____

City _____ State _____ Zip-Code _____

Phone _____ E-Mail _____

(Confirmation will be sent to this E-Mail Address)

Ship To _____

Address _____

City _____ State _____ Zip-Code _____

Phone _____ Contact Name _____ TAG # if needed _____

We only Ship our Products to Commercial Addresses.

Please place a checkmark next to what best describes your Ship To Address:

Legitimate Commercial Building Address _____ Job-Site Address _____ Military or Government Facility _____

QTY	CAT# / MODEL #	DESCRIPTION	UNIT PRICE

Credit Card Type: M/C _____ VISA _____ DISC _____ AMEX _____

Shipping Cost: _____

Using our Freight Carrier

Cardholder's Name: _____

Credit Card #: _____

If No Shipping Cost is included on the Order Form,
we will forward you a Shipping Cost
for your approval, before the Order is processed.

Exp. Date: _____ Credit Card Code # _____
3 digits M/C , VISA & DISC, 4 digits AMEX

**If you prefer that your Order ship
LTL Freight Collect via your own Carrier,**
please provide us with your
Carrier's Name & Account # below:

If the **Billing Address** for your Credit Card is not the same
as your Sold To Address, please provide that Address below:

Address _____

City _____

State _____ Zip-Code _____

Carrier: _____

Account # _____