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PLA	ACING YOUF	R ORDER W	ITH PIPEFUS	SER	
CUSTOMER INFO	ORMATION (please pr	ORDE	ORDER FORM		
Name:			Phone:		
Company:		Fax:			
Street:					
City:	S	State:		Zip:	
SHIPPING (if diffe					
Street:					
City:		tate:	Zip:	Zip:	
PAYMENT METH	IOD				
	rd: □ V	isa Master Card	American Expr	ess Discover	
Card Number:		Expiration Date:	CVV:	CVV:	
Billing Street Addre	ess:				
	ty: S				
Signature:					
Products :(Pleas	e use part number and	d description if possib	ole)		
· ·	•		,		
QTY	Part Number	Description	Unit	Total	

Shipping is by UPS or USPS - Tax when required and shipping charge will be added to total. Expedited shipping available

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