



Brimar
IDENTIFICATION & SAFETY PRODUCTS

ENGRAVED TAGS ORDER FORM

P. O. Box 467 | 64 Outwater Lane, Garfield, NJ 07026 973-340-7889 | 800-274-6271 | Fax: 973-340-7809

BILLING ADDRESS		CUSTOMER #	SHIPPING ADDRESS	
Ordered by: _____ Company _____ Mailing Address: _____ City: _____ State: _____ Zip: _____ Tel: _____ Fax: _____			Company _____ Attention: _____ Street _____ City: _____ State: _____ Zip: _____ Tag or Job Name: _____	

E-MAIL

ORDERING DATA

Purchase Order #: _____ Order Date: _____ Ship Date Requested: _____
Shipping Method: ☐ UPS Reg. ☐ UPS 2nd Day ☐ UPS Next Day ☐ Other: _____

ENGRAVED VALVE TAGS ORDER						BRIMAR USE	
PART #	MATERIAL	TAG SIZE	NUMBER OF LINES & LINE SIZE		QUANTITY	Unit Price	Extended Price
Color: _____	<input type="checkbox"/> 1/16" Plastic	<input type="checkbox"/> ROUND <input type="checkbox"/> SQUARE	<input type="checkbox"/> 1 Line at 1/4"	<input type="checkbox"/> 1 Line at 1/2"			
	<input type="checkbox"/> 1/8" Plastic		<input type="checkbox"/> 1/4" Top & 1/2" Bottom	<input type="checkbox"/> 1 Line To Fit			
	<input type="checkbox"/> 1/16" Phenolic		<input type="checkbox"/> 1/4" Top & 1/4" Bottom	<input type="checkbox"/> 2 Lines To Fit			
	<input type="checkbox"/> .032 Aluminum		<input type="checkbox"/> 3 Lines at 1/4"	<input type="checkbox"/> 3 Lines To Fit			
Color: _____	<input type="checkbox"/> 1/16" Plastic	<input type="checkbox"/> ROUND <input type="checkbox"/> SQUARE	<input type="checkbox"/> 1 Line at 1/4"	<input type="checkbox"/> 1 Line at 1/2"			
	<input type="checkbox"/> 1/8" Plastic		<input type="checkbox"/> 1/4" Top & 1/2" Bottom	<input type="checkbox"/> 1 Line To Fit			
	<input type="checkbox"/> 1/16" Phenolic		<input type="checkbox"/> 1/4" Top & 1/4" Bottom	<input type="checkbox"/> 2 Lines To Fit			
	<input type="checkbox"/> .032 Aluminum		<input type="checkbox"/> 3 Lines at 1/4"	<input type="checkbox"/> 3 Lines To Fit			
Color: _____	<input type="checkbox"/> 1/16" Plastic	<input type="checkbox"/> ROUND <input type="checkbox"/> SQUARE	<input type="checkbox"/> 1 Line at 1/4"	<input type="checkbox"/> 1 Line at 1/2"			
	<input type="checkbox"/> 1/8" Plastic		<input type="checkbox"/> 1/4" Top & 1/2" Bottom	<input type="checkbox"/> 1 Line To Fit			
	<input type="checkbox"/> 1/16" Phenolic		<input type="checkbox"/> 1/4" Top & 1/4" Bottom	<input type="checkbox"/> 2 Lines To Fit			
	<input type="checkbox"/> .032 Aluminum		<input type="checkbox"/> 3 Lines at 1/4"	<input type="checkbox"/> 3 Lines To Fit			
Color: _____	<input type="checkbox"/> 1/16" Plastic	<input type="checkbox"/> ROUND <input type="checkbox"/> SQUARE	<input type="checkbox"/> 1 Line at 1/4"	<input type="checkbox"/> 1 Line at 1/2"			
	<input type="checkbox"/> 1/8" Plastic		<input type="checkbox"/> 1/4" Top & 1/2" Bottom	<input type="checkbox"/> 1 Line To Fit			
	<input type="checkbox"/> 1/16" Phenolic		<input type="checkbox"/> 1/4" Top & 1/4" Bottom	<input type="checkbox"/> 2 Lines To Fit			
	<input type="checkbox"/> .032 Aluminum		<input type="checkbox"/> 3 Lines at 1/4"	<input type="checkbox"/> 3 Lines To Fit			

CREDIT CARD INFORMATION		Sub Total	
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER <input type="checkbox"/> AMERICAN EXPRESS		Sales Tax (N.J. only)	
Card Number _____		Freight Estimate (for Credit Cards)	
Expiration Date: ____/____/____		TOTAL AMOUNT \$	
Name on Card _____		Tax Exempt:* YES NO	
Billing Address of Credit Card _____		Tax Exemption #: _____	
City _____ State _____ Zip _____		*If you have selected Tax Exempt, make sure to fax a copy of your Tax Exempt Certificate along with the order form	
Card Holder Signature (required on purchases of \$450.00 or more.) _____			

SPECIAL INSTRUCTIONS