

# Icemelters.biz

ROCK SALT - TREATED SALT - SALT BRINES - BAGGED SALT

## 2011-2012 ORDER FORM FOR BAGGED ICE MELTER

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

NAME OF PERSON PLACING ORDER: \_\_\_\_\_

COMPANY PLACING ORDER: \_\_\_\_\_

DESIRED DELIVERY DATE: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PRODUCT DESIRED: DRAGON MELT (56) \_\_\_\_\_ ICE BYTER (49) \_\_\_\_\_ ROCK SALT (49) \_\_\_\_\_ PELADOW (56) \_\_\_\_\_

PROPERTY NAME OR DELIVERY LOCATION	PURCHASE ORDER NUMBER	# OF BAGS ORDERED	# OF BAGS DELIVERED	DATE OF DELIVERY	DELIVERY TICKET NUMBER	DRIVER NAME

1) Icemelters.biz will schedule tanks to be filled within 24 hours of receiving an order. In order for an order to be placed on the delivery schedule the night of the order, it must be received no later than 3:00 pm. Every effort will be made to fill all orders but any orders not filled, will be scheduled and filled the next day.

2) Areas shaded in gray must be completed by the person placing the order.

3) All orders must be e-mailed to [orders@icemelters.biz](mailto:orders@icemelters.biz) or faxed to 855-270-0479.

4) A copy of a this form will be e-mailed or faxed back once the order has been processed and completed.

[www.icemelters.biz](http://www.icemelters.biz) use only

PERSON RECEIVING ORDER: \_\_\_\_\_ DATE ORDER WAS RECEIVED: \_\_\_\_\_ DATE ORDER WAS FILLED: \_\_\_\_\_

P.O. NUMBER: \_\_\_\_\_ INVOICE DATE: \_\_\_\_\_ INVOICE NUMBER: \_\_\_\_\_

METHOD OF PAYMENT: \_\_\_\_\_ CHECK # \_\_\_\_\_ CREDIT CARD CONFIRMATION # \_\_\_\_\_

DRIVER NAME: \_\_\_\_\_ PERSON PROCESSING INVOICE: \_\_\_\_\_

