



537 Tapaderos Dr. McGrady, NC 28649

Toll Free: 1-866-667-8465 Phone: 973-846-7817 Fax: 973-858-0219

Website: IndustrialOdorControl.com

Email: sales@industrialodorcontrol.com

Bill To: Address below is Business Residence

Ship To: (Must Be A Street Address)

Date_____ P.O. #_____

Daytime Phone Number:_____

Name/Company: _____

Name/Company:_____

Street:_____

Street:_____

City/State/Zip:_____

City/State/Zip:_____

Email Address: _____

Email Address: _____

Print Name:_____

Part #	Description	Qty.	Unit Price	Extended Price
Sub Total				
Freight (If not known an associate will call upon receipt of order)				
7% NC Sales Tax Unless Exempt.				
Grand Total Amount				
For Freight Collect enter UPS Account Number				
Tax Exempt #: (Enter Number and Fax Copy Of Tax Certificate)				

Payment Method: Payment Enclosed: Visa MasterCard Amex Check (Product held until receipt)

Credit Card Number: _____ Credit Card CCV: _____

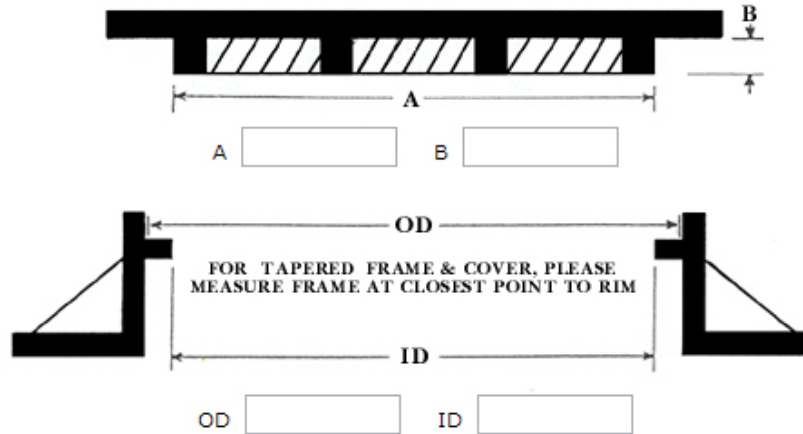
This Card Is: Personal Corporate Credit Card Expiration Date:_____

Print Name Exactly As It Appears On Credit Card:_____

Authorized Signature:_____

Wolverine Manhole Odor Insert Filter Measurement Sheet

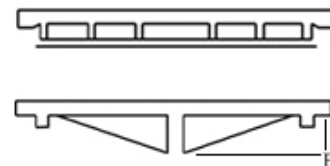
NOTE: The following measurements are required prior to ordering the Wolverine Brand Manhole Odor Insert. For your convenience they can be entered during the online ordering process or simply complete this form, fax us the information and we will process your order.



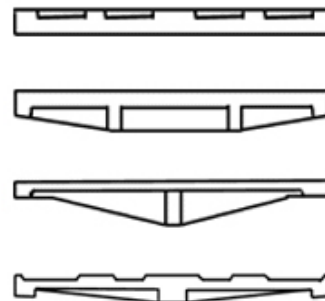
PLEASE CHECK THE COVER DESIGN - OR CASTING NUMBER (if known)

Casting # Quantity
Manufacturer desired

"A" Measurement is the diameter between these two points. (NOT THE OVERALL DIAMETER OF THE COVER)



"B" Measurement is found between these two points (NOT THE OVERALL THICKNESS OF THE COVER)



I certify that the above measurements are accurate and correct. I understand that all sales of odor inserts and inflow protectors are final.

Signature: _____ Print Name: _____