Visit our website www.bladeshop.com for blade type descriptions & special offers

ORDER FORM

Date_____ **Purchase Order #**_____

Order placed by_____

Phone #_____

Email_____

2891 Rodman Drive
Seneca Falls, NY 13148

Phone: 315-568-8093
Fax: 315-568-8146
Email: sales@bladeshop.com

Bill To:

Company Name:

Attention:

Phone: Fax:

Street Address:

City:

State: Zip Code:

Ship To / By Way Of: _____

Company Name:

Attention:

Phone:

Street Address:

City:

State: Zip Code:

QUANTITY	TYPE (1-8)	DESCRIPTION (SEE A-F BELOW)

Payment Method

- **Mastercard**
- **Visa**
- **American Express**

Card#_____

Expiration Date_____ Security Code_____

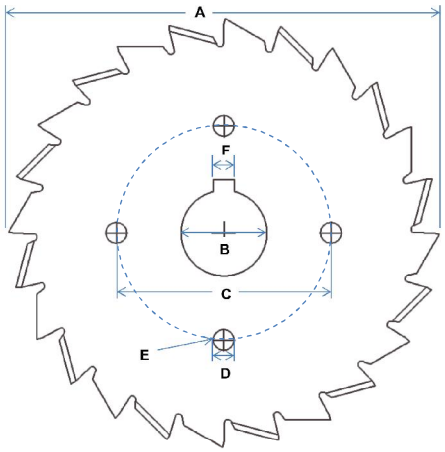
Name on card_____

Signature_____

- **C.O.D.**
- **Open Account** *

*(If you do not already have an open account with us and would like to establish one, please attach the names, addresses & phone numbers of one bank and three companies you do business with for credit references. Our terms are net 30 days from date of invoice.)

Mounting Hole Pattern



A ï Blade Diameter
B ï Center Hole Diameter
C ï Pin/Bolt Circle Diameter
D ï Pin/Bolt Hole Diameter
E ï Number of Pin/Bolt Holes
F ï Keyway Size & Position