

WBA Order Form



Date _____
 Type Architectural Bridge Highway Parking & Open Air Structures

Customer Bill To Address

Company Name _____ Payment Terms Net 30
 Address 1 _____
 Address 2 _____
 City _____
 State _____
 Zip Code _____ Country _____
 Contact: _____ Phone _____
 Email _____ Fax _____

Ship To Address

Company Name _____ Shipping Terms FOB SHIP POINT (PP&A)
 Address 1 _____
 Address 2 _____
 City _____
 State _____
 Zip Code _____ Country _____

Purchase Order Number _____
 Project Name _____
 Quotation Number _____
 WBA Rep: _____
 Tax Exemption No Yes *(must include copy of certificate)*

Customer Need Date

Product #	Description	(Color)	Qty	UM	Price	Extension

Special Shipping Information (freight carrier, terms, etc.)

Signature _____ Date _____

Fax To: Customer Service @ 716-691-9239

