

AUTHORIZATION/ORDER FORM

SOLD TO:

Section **1**

Company: _____
Street: _____
City/State: _____ Zip: _____
Contact Person: _____
Phone: () _____ Date: _____

SHIP TO: (Street Address ONLY - No P.O. Box)

Section **2**

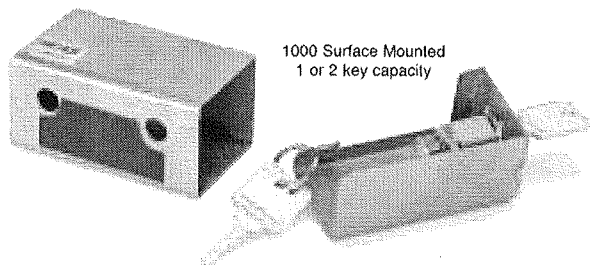
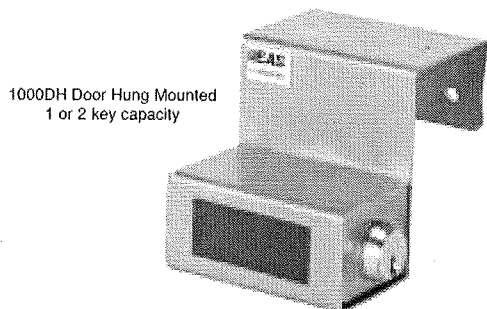
Company: _____
Street: _____
City/State: _____ Zip: _____
Contact Person: _____
Phone: () _____ Date: _____

INSTALLATION ADDRESSES (Required by Fire Department)

Section **3**

List street addresses where box will be installed.

Bldg. Name: _____
Street: _____
City: _____



PAYMENT INFORMATION

Section **4**

☐ Check or Money Order
☐ Visa ☐ Mastercard
Card Billing Address #'s
Street or P.O. Box#: _____

Exp. Date: _____
Card Verification Code: _____
(Last 3 digits on back of card)
Zip Code: _____

Card Number _____

Signature _____
I agree to pay the total amount according to card issuer agreement.
(A convenience fee of \$5.00 is applied when using a credit card.)

AUTHORIZED SIGNATURE

Section **5**

AUTHORIZED FIRE AGENCY SIGNATURE

Weymouth Fire Department

FIRE DEPARTMENT

Section **6**

Qty.	Stock #	Item Description	Price Ea.	Total
	1000DH	Door Hung Mount	129.00	
	1000	Surface Mount	129.00	
All Sales & Shipping is now taxable in RI when orders are shipped to RI addresses				
Shipping & Handling is \$17.00 per unit			Shipping & Handling	
Please add a convenience fee of \$5.00 when using a credit card			Convenience Fee	
Make check payable to: Emergency Access Systems, Inc. Send this form with payment to: EAS, Inc. P.O. Box 1811 Kingston, RI 02881			SUBTOTAL	\$
			RI Sales Tax 7%	\$
			TOTAL	\$

FOR FIRE DEPT. USE ONLY
☐ Check here if products ordered
on this form must be SUBMASTERED
Add \$9.00 to EACH item ordered

PLEASE CALL FOR INFORMATION ON RETURN / WARRANTY POLICIES
TOLL FREE 1-877-562-5269 OR FAX 401-295-7708