

COMMENTS:

LIST ALL CHEMICALS AND PROCESS FLUIDS IN CONTACT WITH THE EQUIPMENT

INFORMATION	PRODUCT #1	PRODUCT #2
CHEMICAL NAME or Attach MSDS		
DESCRIPTION or Attach MSDS		
HEALTH SAFETY HAZARDS or Attach MSDS		
PRECAUTIONS FIRST AID or Attach MSDS		

***NOTE: You must include MSDS Sheet for materials used in the equipment being returned for warranty, repair or credit.**

We WILL NOT FORWARD or RETURN
Equipment that has not been decontaminated. Pumps, Meters, Engines, Tanks, etc. must be drained of oil and gasoline and thoroughly flushed of chemicals.

*** Remove Oil, Gas and Chemicals as Required by EPA, OSHA and Manufacturers ***

I hereby certify that the equipment being returned has been cleaned and decontaminated in accordance with good industrial practices. This equipment poses no health or safety risks due to contamination.

BY: _____
Signature

Please Print Name

Cut Here



CREDIT CARD AUTHORIZATION FORM

Box 45565 • Omaha, Nebraska 68145-0565
Phone: (402) 333-1444 • Fax: (402) 333-5546 • E-Mail: dultmeier@dultmeier.com

Dultmeier Sales accepts **VISA, MASTERCARD, and AMERICAN EXPRESS**. For your protection, we are unable to ship to any address other than the one on your credit card billing address without your signature. **PLEASE COMPLETELY FILL IN ALL BLANK AREAS AND SIGN.** Please fax to: (402) 333-5546.

DATE: _____

ACCOUNT NUMBER: _____

PLEASE FILL-OUT, SIGN BELOW AND RETURN TO DULTMEIER SALES. THANK YOU.

Credit Card Number #: _____

Expiration Date: _____

Validation Code (Last 3 digits on card signature panel): _____

Ship To Information (If different from Billing Information):

Company Name: _____
Print Name

Company Name: _____
Print Name

Billing Address: _____

Shipping Street Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Day Phone: _____ Evening Phone: _____

I authorize the following person(s) _____ to call orders in to be shipped and billed to my credit card.

Signature **X** _____

PLEASE SIGN AND RETURN TO DULTMEIER SALES. THANK YOU.

Please Note: A new form with the new card number & expiration date will be required when current card expires.