Black Ice Coatings

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www.BlackIceCoatings.com

Tag / Invoice #

(Office Use Only)

Order Date

(Office Use Only)

Order Form

Name:					
Address:					
City: State:			Zip:		
hone: Alternate Phone:			E-Mail:		
Item Description:			<u> </u>		
Identification Number:		(CI	F I N I S H (Choose Black Ice, Cerakote, or Water Transfer Printing)		
Special Instructions:		Bla	ick Ice	Water Transfer Printing	
				Pattern:	
		Cer	rakote Color	Clearcoat: Dead-Flat	
				Semi-Gloss	
				☐ High-Gloss	
☐ Che	Type: it Card (Over the Phone Only) k/Money Order				
Promo Code:					
By initialing this box, I do herisks associated with this process fogging, or any other damages mesistant. Understanding these riscope.	y occur even if the manufacturer	tings to immers claims t	ing the scope in t	underwater. 2. Flooding, uct is waterproof or water	
·	Creative License Auth				
By initialing this box, I do item(s) listed above. I understand services rendered as well as the p		my liking rework t	g that I am still	_	
Once notified that your order is or received with 6 weeks from the notions sold to recuperate the costs incur	omplete, you are required to provotification date, your item(s) will	ide full	•		
I agree to all terms above, includ	ing work description, pricing, and	d payme	nt terms.		
Customer Signature:	stomer Signature:			:	