

# Suwannee Salvage, Inc.

13396 76<sup>th</sup> Street  
Live Oak, FL. 32060  
800-533-5458  
Fax: 386-364-5076

Please print this form, fill it out and fax it to the number above.  
(If the form is not filled out completely and legibly your order cannot be processed!)

Date: \_\_\_\_\_ I spoke with:  Brad  Larry  Jimmy

=====  
Name: (Exactly as it appears on Credit Card)  
\_\_\_\_\_

Expiration Date: \_\_\_\_\_ Card Type:  Mastercard  Visa

Credit Card #: \_\_\_\_\_

3 Digit Security Code On Rear Of Card: \_\_\_\_\_

(Reminder: Billing address, name, credit card number and 3 digit security code must match exactly.)

Billing Address:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

Contact: \_\_\_\_\_

Credit card fax authorization: I the undersigned, do hereby authorize Suwannee Salvage, Inc. to charge my credit card for payment of the products and/or services listed below.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

=====

Shipping Address: (If different from Billing)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_

Contact: \_\_\_\_\_

---

---

**Parts Ordered:**

1. Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Part \_\_\_\_\_

2. Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Part \_\_\_\_\_

3. Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Part \_\_\_\_\_

4. Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Part \_\_\_\_\_

5. Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Part \_\_\_\_\_

6. Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Part \_\_\_\_\_

Subtotal: \$ \_\_\_\_\_ .00

Shipping & Handling: (Non-refundable) \$ \_\_\_\_\_ .00

Add 7% Sales Tax: (Florida Sales Only) \$ \_\_\_\_\_ .00

TOTAL: \$ \_\_\_\_\_ .00

Order authorization: I the undersigned, do hereby acknowledge, confirm and accept the above order placed with Suwannee Salvage, Inc.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_