

Seven-Footer Order Form (Two and Three-Footers require a separate form and details)

Instructions: The following information needs to be included with your order. Please print this form, and then make a copy of it on YOUR letterhead where this box now appears (please remove this box).

Please make your check payable and mail to:

Divnick International, Inc.
Attn: Wishing Well Order
321 Alexandersville Road
Miamisburg, OH 45342

Telephone: 937-384-0003
Fax: 937-384-0004
E-Mail: sales@divnick.com
Website: www.SpiralWishingWells.com

Purchase Order Number, if any _____ **Date** _____

Your Name (and title, if applicable) _____

Company Name (include store # if applicable) _____

Contact Person if other than you _____

Street Address _____

City, State, Zip Code _____

Telephone Number _____ **Fax Number** _____

Email address _____

Fax to: 1-937-384-0004

____ **Number of Seven-Footers** (white, unless specified here (+\$200)) _____

Cost of Well(s) before any discounts = \$ _____

Minus discounts (if any) _____ - \$ _____

Sub-Total = \$ _____

Sign Options (<http://spiralwishingwells.com/prices/prices.html#7>)

Fiberglass Sign Rod @ \$50 per Well = \$ _____

Plastic Sign Board @ \$28 per Well = \$ _____

Generic 4-color laminated printing @ \$135 per Well = \$ _____

Custom 4-color laminated printing @ \$160 per Well = \$ _____

Crating (completely enclosed and palletized) @ \$95 per Well = \$ _____

Shipping (Please call 1-937-384-0003 for shipping quote) = \$ _____

Ohio Sales Tax (7.5% sales tax in Ohio, or submit tax-exempt verification) = \$ _____

Total Cost and Payment Amount = \$ _____

Payment Method _____

Check, Wire Transfer, Other (Sorry, credit cards cannot be used for floor-model Wells)

If you are ONLY going to use your Well with balls, and do not need the coin-guides, please check this box: _____

If you qualify for shipping before payment is received, your signature below indicates your agreement to remit payment upon receipt of shipping confirmation and a faxed invoice or (specify other) _____

Authorized Signature _____

Title _____