

Order Form

Put us to the test!

If you are sending us a part/item to test how well our process works for you, the single part/item must be 5.0 square inches or less. Written test results on our company letterhead will be completed and returned within 30 days.

Ordering

Orders will recieve a quote on specified quantities of the part/item(s) within 7 days of receipt of your order. Please fill out the form below completely.

| Date: | | | | | | |
|--|-----------------------|-----------------------------|--------------------------|--|--------------------------|--|
| Shipping Address | | | Billing Address (if app | Billing Address (if applicable) | | |
| Business Name(if applicable): | | | Business Name(if appl | Business Name(if applicable): Contact Name: | | |
| Contact Name: | | | Contact Name: | | | |
| Address: | | | Address: | Address 2 (if applicable): | | |
| Address 2 (if applicable): | | | Address 2 (if applicable | | | |
| City: | State: | Zip: | City: | State: | Zip: | |
| Phone: | FAX: | | Phone: | FAX: | | |
| If billing address is different from Billing Address section of this for | | ss, please fill out t | he | | | |
| Part Description(s): | | | | | | |
| | | | | | | |
| Usage: | | | | | | |
| | | | | | | |
| Base Material: | Dimensions: | | Quantity: | Finish: | Finish: | |
| Operating Conditions (load, spe | eed. temperature rand | ge. atmosphere. c | riteria of failure): | | | |
| epotating contained (lead, ep | | go, aoopo.o, o . | | | | |
| Normal Lot Production: | Sketch or print: | | Estimated annual usage: | Freight Insurance | Freight Insurance value: | |
| | | | | | | |
| Critical areas: | | | | | | |
| Special Instructions: | | | | | | |
| | | | | | | |
| Desired results: | | | | | | |
| - | | | | | | |

Send completed form to:

SlicKoat, LLC, 4705 S. 83rd E. Ave Tulsa, OK 74145