

**WWAS 911 REFLECTIVE ADDRESS SIGN ORDER FORM**

**Please complete the following information**

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

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

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

Town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Most convenient time to contact you? (Please check one) Morning: \_\_\_\_ Afternoon: \_\_\_\_ Evening: \_\_\_\_

Address Number Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sign Preferences** (Please check the appropriate line)

Would you like WWAS to install your sign? YES \_\_\_\_\_\_\_ NO \_\_\_\_\_\_\_

Would you like WWAS to choose the design and location? YES \_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_

My position preference is: VERTICAL \_\_\_\_\_\_\_ HORIZONTAL \_\_\_\_\_\_\_

ONE SIDED \_\_\_\_\_\_\_ TWO SIDED \_\_\_\_\_\_\_

Existing post is: Metal \_\_\_\_\_\_\_ Wood \_\_\_\_\_\_\_ Tree \_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_

Existing Mailbox is: Plastic \_\_\_\_\_\_\_ Metal \_\_\_\_\_\_\_ House \_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_

**\*Please Note: Sign installations are only available for the towns of Warren, Wentworth, Dorchester, Piermont, Benton, Groton, and Rumney. Special Exceptions will be considered on a “case by case” basis. Please explain on back of this form.**

**Payment** (Please check the appropriate line)

Each sign costs $15. Choose Payment Method: Cash: \_\_\_\_\_\_\_ Check (payable to “Warren-Wentworth Ambulance Service” (WWAS): \_\_\_\_\_\_\_ Credit/Debit Card: \_\_\_\_\_\_\_

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address for Card: (Check here if it is the same as the “Street Address” \_\_\_\_\_\_\_ or “Mailing Address” \_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ CVV (3 Digit code on the back): \_\_\_\_\_\_\_\_\_\_\_\_

**\*\*Please include the payment with order if you are paying with cash or check. We will contact you for the best time to install your reflective number sign.**