



Parts Order Form

email us at parts@loading-automation.com

Date: ___/___/___	<input type="checkbox"/> Order <input type="checkbox"/> Quotation	Taken by :	Order #
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Name & Billing Address	Ship to Address	Order Details
		Cost Center #
		Project # (facility ID)
		G.L. Acct. #
		Employee #
Contact:		Vehicle Asset #
Phone #	Attn:	Vehicle ID #
Fax #	PO or Reference # _____	

Part #	Description	Qty ordered	Qty Shipped	Quoted Price	Total	Pkg #

Shipping notes:	Billing of shipping charges:
Ship via :	Shipping Acct. #

Tracking Numbers :	Pkgs	Lbs (#)	dimensions	value
	Pkg#1			
	Pkg#2			
	Pkg#3			
	Pkg#4			
	Pkg#5			

Order pulled by: _____ Date ___/___/___ Signature _____