

S & S Welding, Inc.

METAL FABRICATION & REPAIR
STATE CONTRACTORS LIC. #309886

Field Job Order Information Form

Please Attach this Form via Fax or Email

Or Please if phoning in order have this info available

Business / Customer's /Name: _____

Contact Name (If Applicable) _____

Address _____

Major Cross Street: _____

Phone Number _____ Fax Number _____

Info needed if not a current Customer

Credit Card Info: (mark one) MC___ VISA___ AMX___ DISC. ___

Credit Card Name _____

Account Number: _____ Exp. Date: _____

Credit Card Billing Address: (Just the numerical part of the address) _____

City: _____ State___ Zip Code: _____

Type of Job: Repair or Fabrication

Brief Description: If it's a Fabrication please attach Drawings if applicable

Misc. Questions:

Distance from jobsite from where we will park our vehicle? _____

Date & Time you would like the work performed _____

(Follow up Confirmation / Acknowledgment required for Field Service)

Are there any material or supplies need to bring with the welder?

**** ALL CHARGES ARE BASED ON PORT TO PORT CHARGES**