



Invest in VEST for all your safety needs.

- Instructions:**
- 1 Fill out form completely
 - 2 Pack items for shipping including a copy of this form
 - 3 Ship to address at below or call for pick-up (additional charges apply)

Company Name: _____ Date: _____

Name of Contact: _____ e-mail: _____

Contact Phone Number: _____ Company Phone Number: _____

_____ Fax Number: _____

Billing Address: _____ P.O. Number: _____

Shipping Address: _____

Vance Electrical Safety Testing, LLC

1081 Old Gravois Road
Fenton, MO 63026
Phone: (636)575-7767
Fax: (636)326-5503
e-mail: HVvest@gmail.com

Test Lab Address:

Type of items to be tested

Class 00 to 0 Gloves (pairs): _____ Shoulder Sleeves (pairs): _____ Rubber Blankets: _____

Class 1 & 2 Gloves (pairs): _____ Class 3 & 4 Gloves (pairs): _____

Failure Replacement Request: Automatically Upon Request Only
(All brands sold in pairs only) Novax Salisbury/White (special order)

Tested & passed Single gloves: Returned Recycled by Test Lab

Shipping, Receiving & Delivery Procedure:

Customer Delivery & Pick-up VEST Lab Pick-up & Delivery UPS or FEDX

Standard Delivery Time Two Day Rush Provide Insurance for Packages

Special Instructions: _____

Authorized Signature: _____