



On-Site Sewage Facilities Publications Order Form

This order form is effective 1/3/2012. Please call 800-SAFE-811 (800-723-3811) to ensure you have a current Order Form.

You can also order via the Web. Go to: www.teex.org and click on "E-Store." Prices subject to change.

Billing Address:**Ship To: (if different than billing address)**

Organization

Organization

*Contact Name**Title*

*Contact Name**Title*

Street Address

Street Address

*City**State**ZIP Code*

*City**Stat**ZIP Code*

Phone Number

Phone Number

MANUALS

Item	Price	Qty	Total
OSSF Aerobic/Surface Application System O&M (Z-WW-PUB-6)	\$30		
OSSF Designated Rep. (Z-WW-PUB-7)	\$70		
OSSF Installer I (Z-WW-PUB-8)	\$65		
OSSF Installer II (Z-WW-PUB-9)	\$65		
OSSF Site Evaluator (Z-WW-PUB-10)	\$65		

NOTE: Purchase Information (Shipping and Handling, Payment Method, Address, etc.) is on Page 2.



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*(NOTE: Shipping & Handling will be added to the taxable total. If paying by check, please call 800-723-3811 for shipping costs.)

Sub Total	
*Shipping & Handling	
Taxable Total	
Sales/Use Tax (8.25%) <i>(Must send copy of exempt form to qualify for exemption)</i>	
TOTAL	

**Please allow 2 – 3 weeks for delivery.
Overnight or special handling requires additional fees.
Call 800-SAFE-811 (800-723-3811)**

Submit Both Pages of This Order Form:

FAX: 979-458-1426
or
MAIL:
TEEX-ITSI
Publication Sales
PO Box 40006
College Station, TX 77842-4006

Customer Purchase Agreement

Arrange payment by one of the following methods:

- ***Check/Money Order/Cashier's Check enclosed payable to TEEX.
- Purchase Order** – Copy of official signed company PO **MUST** be attached.
NOTE: For an official company PO to be valid, it **MUST** include the following:
(1) Agency/Company Name, (2) Billing Address, (3) Contact Name & Phone Number,
(4) Description of Goods and/or Services, (5) Amount, and (6) Authorized Signature.
- Credit Card**
 Discover MasterCard Visa American Express Pinless Debit Card
Name on Card: _____ Signature: _____
(NOTE: If you select method #2 or #3, you will receive an invoice from TEEX)
ZIP Code of Cardholder: _____ Last 4 Digits of Card Number _____

For Customer Security, Required Information Below Will Be Destroyed Once Payment Is Processed.

✂ Administration, Cut & Shred All Below Administration, Cut & Shred All Below

Credit Card # _____ Expiration Date: _____ / _____
(MM) (YY)

***By sending your check, please be aware that you are authorizing the Texas Engineering Extension Service (TEEX) to make a one-time electronic debit from your account at the financial institution on your check. This electronic debit will be for the amount of the check; no additional amount will be added to the amount and ALL transactions will remain secure. Please contact TEEX's Financial Services Department at 979-458-6906 to learn about other payment options if you prefer NOT to have your check used in this way. We value your business and appreciate your selecting TEEX for your training needs.