



# Waterjet Order Worksheet

Date: \_\_\_\_\_

Customer Name:

\_\_\_\_\_

Contact Name:

\_\_\_\_\_

Customer Address:

\_\_\_\_\_

\_\_\_\_\_

Customer Phone:

\_\_\_\_\_

Date Required:

\_\_\_\_\_

Brief Description of Part:

\_\_\_\_\_

\_\_\_\_\_

Material/Thickness:

Quantity Required:

\_\_\_\_\_

Customer Supplied Design Information: Cad (DXF) File\_\_\_\_\_

Print\_\_\_\_\_ Sample Part\_\_\_\_\_ None\_\_\_\_\_

-Upon Design Approval a 50% Deposit will be required for Build-

Customer Signature:

\_\_\_\_\_

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

CC Billing Zip Code: \_\_\_\_\_ 3/4 Digit Security# \_\_\_\_\_