



ORDER DETAILS
 Please Fax to 630-852-7554 or
 E-Mail to orders@BalesUSA.com

2824 Hitchcock Avenue
 Downers Grove, IL 60515
 Ph. # 630-852-4665
 Fax # 630-852-7554
 www.BalesUSA.com

Company: _____ Contact: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-Mail for Shipping Confirmation _____

Quantity _____ Purchase Order # _____ Quote # _____

Part Description _____ Base Material _____

Date Requested _____ Ship Method _____ Shipper Account # _____

| | Deposit Amount | Tolerance +/- | |
|---|----------------|---------------|---|
| <input type="checkbox"/> Diamond EN™ | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> NIBORE™ | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> NICKLON™ | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> Electroless Nickel | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> Diamond Chrome | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> Hard Chrome | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> Passivation | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |
| <input type="checkbox"/> Other | _____ | _____ | <input type="checkbox"/> Per Side <input type="checkbox"/> Total |

- Polishing**
Finish Required: _____
- Stripping**
Current coating? _____
- Masking:** Please attach prints or drawings.
- Welding:** Please attach prints or drawings
- Post Bake**
- Low Pressure Glass Bead Blasting**
- Aluminium Oxide Blasting**

Further Information: List as many details as possible to help expedite your order. Prints, drawings or pictures are also appreciated.

Signature _____