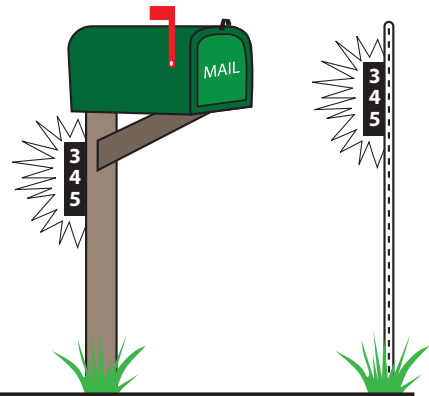


HELP US FIND YOU IN AN EMERGENCY!
MONTICELLO FIRE DEPARTMENT

**REFLECTIVE
 ADDRESS MARKER
 ORDER FORM**



Please complete the following form. Print clearly or type.

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____

ADDRESS NUMBER REQUESTED:

--	--	--	--	--

Place ONE number per box, left to right. If your address number has fewer than 5 digits, place an **X** in any unused box(es).

Yes, I want the Monticello Fire Dept. to install my reflective address marker for me.

- I added \$5 -- my total is \$20
- I am 65+ -- my total is \$15

Select the way we should install:

- Horizontal **HORIZONTAL**
- Vertical

VERTICAL

Instructions:

Cost: just \$15.00

Installation is available for additional \$5.00

(Free installation for senior citizens 65+)

Note: Our installation service is available ONLY in the Monticello NY Fire District.

CASH (in person) or CHECKS accepted.

*Make checks payable to: **Monticello PFA***

Mail or bring order form and payment to:

Monticello PFA L-2767

23 Richardson Ave., Monticello, NY 12701

FOR OFFICE USE ONLY

Paid:	Y	N	Cash	Check # _____	Install?	Y	N	Sign:	\$15.00
								Installation:	\$ _____
Order taken by:	Phone	Verbal	Other						
Order taken by: (Name)	_____								
Order Date:	_____	Notified?	Y	N	Total due/pd. \$	_____			