



Polyester Converters Ltd.

Faxed Order Form

Please print out this form, fill in the details and then fax back to: + 44 (0) 20 7277 5654

If previous customer please quote your customer reference no:

Contact name:

Contact position:

Company name:

Invoice information: **Delivery information: (leave blank if the same as invoice address)**

Address: Address:
.....
.....
.....

Postcode: Postcode:

Country: Country:

Tel No. (include international dial code):

Fax No. (include international dial code):

E-mail:

Webpage address:

What type of product would you like to order? Polymex Product Rolls Sheets Other

Product/ Polymex Code: Use one per order

Quoted price per Unit:

Material/ Product Description

How would you like to pay for this order? Account holder Credit Card Cheque