STATE OF CONNECTICUT

DEPARTMENT OF TRANSPORTATION
ATTN: DOT Print Shop
2800 Berlin Tpke
Newington, CT 06111
(860) 594-3086

ORDER FORM – Form 817 – SHIPPED ONLY

DATE: _____

Company Name: _____ Addressee: _____

Telephone: (_____) _____ Fax No: (_____) _____

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Street Address: _____ Dept./Floor: _____

UPS does not deliver to P.O. Boxes; include full street address where order is to be delivered.

City: _____ State: _____ Zip Code: _____-_____

Make Checks payable: Treasurer, State of Connecticut			
Form 817 Standard Specifications: $16.00 Each			
QTY	Cost	Shipping*	TOTAL
Check Number:		GRAND TOTAL:	

* Postage is $4.00 each, but is NOT required on orders using their Federal Express Account.
(See instructions below)

Overnight Service (**Federal Express ONLY**) Account No: _____

If using Federal Express, please do not include the cost of shipping. Packages are shipped after payments have been processed.

Please mail completed form and payment to the above address.