

Legend plate Customer order form

Please photocopy this form. When complete fax to 1300 NHP FAX (in Australia) or 0800 FAX NHP (in New Zealand).

Name: _____	Nearest NHP branch: _____
Company: _____	_____
Address: _____	_____
_____	_____
Phone No.: _____	_____

Order No.: _____	Date: ____/____/____	Date required: ____/____/____
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Step 1 - Check Legend Plate

Vertical
 Horizontal

Step 2 - Center quantity and customer text

Qty: _____

Line 1*

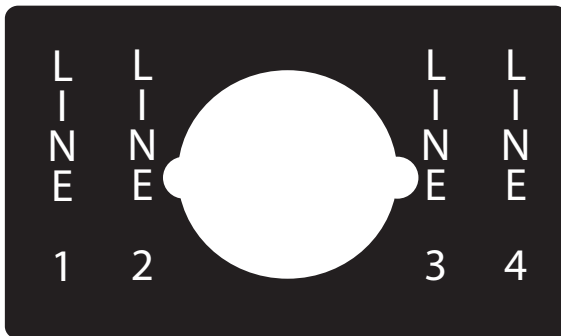
Line 2*

Line 3*

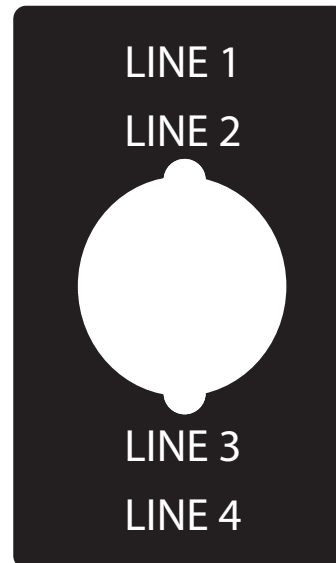
Line 4*

* Max. 9 characters each line

9



Horizontal legend plate



Vertical legend plate