CUSTOM ROTOR HAT ORDER FORM

PO #: _____ **Date:** _____

BILLING ADDRESS:

Name: _____

Address: _____

_____

City: _____ State: _____

Zip: _____ Country: _____

Daytime Phone: _____

SHIPPING ADDRESS:

Name: _____

Address: _____

_____

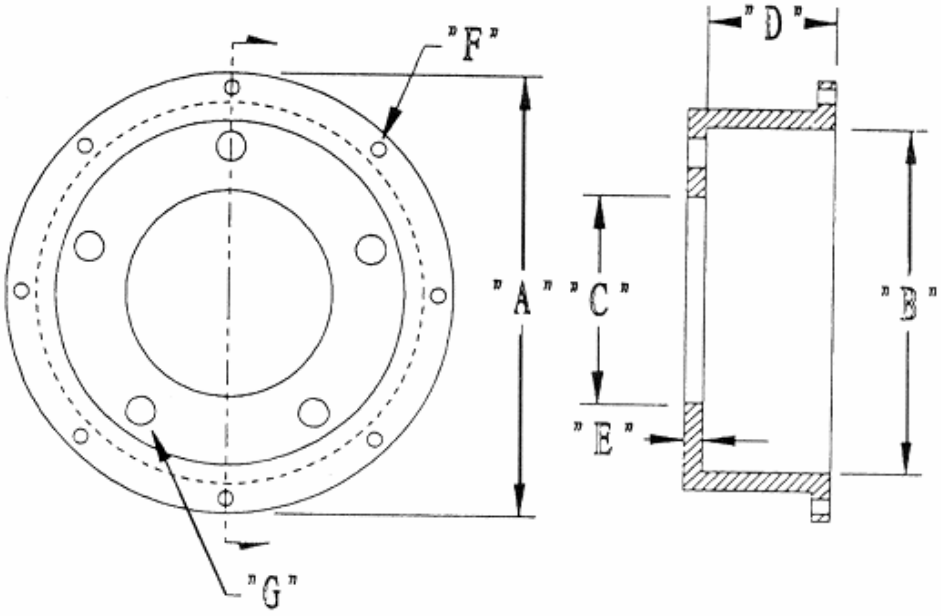
City: _____ State: _____

Zip: _____ Country: _____

Daytime Phone: _____

SHIP VIA: ☐ UPS Ground ☐ UPS 3rd Day ☐ UPS 2nd Day ☐ UPS Overnight

Other: _____



A - MAXIMUM DIAMETER FOR CALIPER CLEARANCE	
B - MINIMUM DIAMETER TO FIT OVER HUB	
C - CENTER BORE DIAMETER	
D - ACTUAL OFFSET	
E - FACE THICKNESS	
F - NUMBER OF HOLES HOLE SIZE & BOLT CIRCLE	
G - NUMBER OF HOLES HOLE SIZE & BOLT CIRCLE	

NOTE: ALL HATS ARE CNC MACHINED FROM 6061 T6 ALUMINUM

METHOD OF PAYMENT: ☐ COD ($7.00 charge) ☐ VISA ☐ Master Card ☐ Account

OTHER: _____

Card Number:

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

_____

Name as appears on card

Exp. Date:

☐☐☐☐

_____

Signature