



**Simple Solutions Distributing LLC.  
6 Jacobs Road West Milford, NJ 07480**

**Toll Free: 1-866-667-8465    Phone: 1-973-846-7817    Fax: 973-858-0219**

**Website: [WWW.Stopsepticodor.com](http://WWW.Stopsepticodor.com)    Email: [SimpleSolution1@optonline.net](mailto:SimpleSolution1@optonline.net)**

**Bill To:** Address below is  Business  Residence

**Ship To: (Must Be A Street Address)**

Date \_\_\_\_\_ P.O. # \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Name/Company: \_\_\_\_\_

Name/Company: \_\_\_\_\_

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Item	Size/Color	Qty.	Unit Price	Extended Price
<b>Wolverine Manhole Odor Filter Insert</b>	<b>Enter Dimensions In Table On Measurements Page Below</b>			
Super Wolverine	3" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/>			
Mega Wolverine	3" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/>			
Standard Wolverine	1.5" <input type="checkbox"/> 2" <input type="checkbox"/> 3" <input type="checkbox"/> 4" <input type="checkbox"/>			
Inline Wolverine	1.5" <input type="checkbox"/> 2" <input type="checkbox"/> 3" <input type="checkbox"/> 4" <input type="checkbox"/>			
Odorgnome	1.5" <input type="checkbox"/> 2" <input type="checkbox"/> 3" <input type="checkbox"/>			
Saturation Indicator	<b>Fits Inline Filters Only</b>			
No Hub Adaptor	1.5" <input type="checkbox"/> 2" <input type="checkbox"/> 3" <input type="checkbox"/> 4" <input type="checkbox"/>			
Trock 14"	Sand <input type="checkbox"/> Char. <input type="checkbox"/> White <input type="checkbox"/>			
Trock 17"	Sand <input type="checkbox"/> Char. <input type="checkbox"/> White <input type="checkbox"/>			
Trock 24"	Sand <input type="checkbox"/> Char. <input type="checkbox"/> White <input type="checkbox"/>			
Trock 36"	Sand <input type="checkbox"/> Char. <input type="checkbox"/> White <input type="checkbox"/>			
			<b>Sub Total</b>	
			<b>Shipping Cost</b>	
			<b>C.O.D. Amount</b>	
			<b>Grand Total Amount</b>	
			<b>Amount Enclosed If Any</b>	
			<b>Tax Exempt: (Enter Number and Fax Copy Of Tax Certificate)</b>	

**Payment Method:** Payment Enclosed:  Visa  MasterCard  Discover  Amex  C.O.D.

**Credit Card Number:** \_\_\_\_\_ **Credit Card CCV:** \_\_\_\_\_

**This Card Is:** Personal  Corporate  **Credit Card Expiration Date:** \_\_\_\_\_

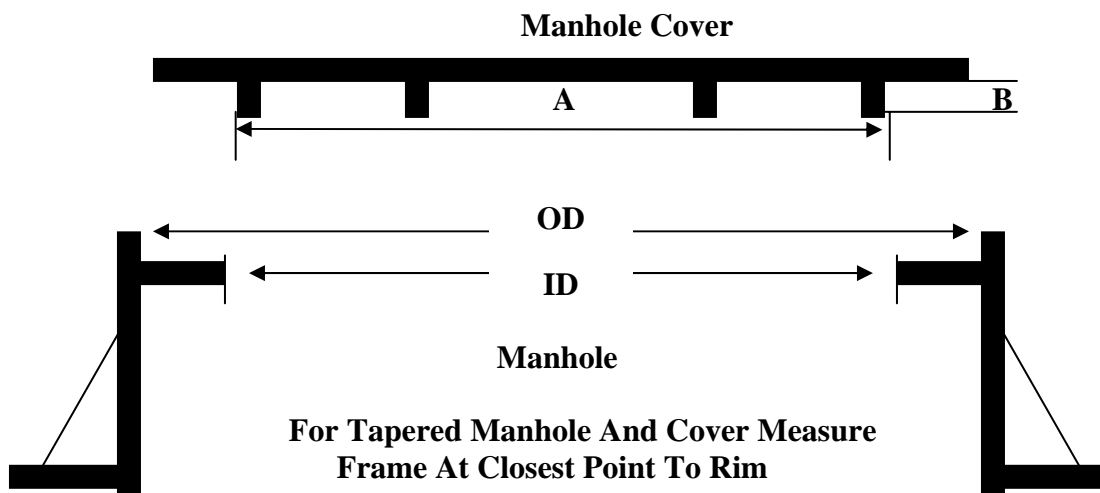
**Print Name Exactly As It Appears On Credit Card:** \_\_\_\_\_

*Wolverine Brand*® Manhole Odor Filter Insert  
**Superior Odor Control, Superior  
 Quality, Exceptional Price**



**Required Measurements**

**Note:** The following measurements are required prior to ordering the *Wolverine Brand*® Manhole Odor Filter Insert. For your convenience they can be entered during the online ordering process or simply complete this form, fax us the information and we will manually process the order for you.



Measurement Description:	Actual Measurement:
A= Drop Ring Diameter	A=
B= Drop Ring Depth	B=
OD= Manhole Frame Diameter	OD=
ID= Inside Frame Diameter	ID=

I Certify That The Above Measurements I Have Supplied Are Accurate And Correct

Signature \_\_\_\_\_ Print Name \_\_\_\_\_