



APEX FIRE SERVICES

MAINTENANCE WORK ORDER

449 Industry Drive • Columbus, Ohio 43204 • (877) 461-APEX • (614) 274-6400
www.apexfireservices.com • production@apexfireservices.com • Fax (614) 274-6407

Affiliate Co: _____

Sales Rep: _____

PO #: _____

SHIPPING INFORMATION

Department: _____

Contact: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email: _____

BILLING INFORMATION

Same as shipping address PO #: _____

Credit Card on File Call for Credit Card Information

Department: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Email: _____

INVENTORY OF ITEMS INCLUDED IN THIS SHIPMENT (#):

_____ Jackets	_____ Helmets	_____ Hoods	_____ Coveralls
_____ Trousers	_____ Pairs of Boots	_____ Pairs of Gloves	_____ Other: _____

GARMENT MAINTENANCE INSTRUCTIONS AND OPTIONS:

Decontamination Advanced Inspection Garment Cleaned by Customer Immediately Prior to Shipment to AFS

Advanced Cleaning Repair Advanced Inspection & Contact with Estimate to Repair

Alterations Warranty Repair Advanced Cleaning, Advanced Inspection & Contact with Estimate to Repair

Known Contaminants or Exposures: _____

Special Instructions: _____

If applicable, please indicate on attached diagrams areas in need of repair OR complete the section(s) below.

Garment Information

Jacket Trouser Helmet Boots Other

Manufacturer: _____

Serial Number: _____

Date of Manufacture: _____

Issued To: _____

Garment Information

Jacket Trouser Helmet Boots Other

Manufacturer: _____

Serial Number: _____

Date of Manufacture: _____

Issued To: _____

Garment Information

Jacket Trouser Helmet Boots Other

Manufacturer: _____

Serial Number: _____

Date of Manufacture: _____

Issued To: _____

Garment Information

Jacket Trouser Helmet Boots Other

Manufacturer: _____

Serial Number: _____

Date of Manufacture: _____

Issued To: _____

Authorized by: _____ Shipment Date: _____ Requested Date: _____

Please include this form and diagrams with your shipment. They may also be emailed to production@apexfireservices.com. When shipping gear for decontamination, please securely wrap in plastic bags to prevent any bleed-through in the cardboard shipping container. If you have any questions regarding shipping or need a shipping label, please contact us immediately.



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COAT INSPECTION DIAGRAM

X location and make brief note of type of repair needed.

Employer Identification Number	Name					
Serial #	Date of Mfgr	Manufacturer	Chest	Front	Back	Sleeve

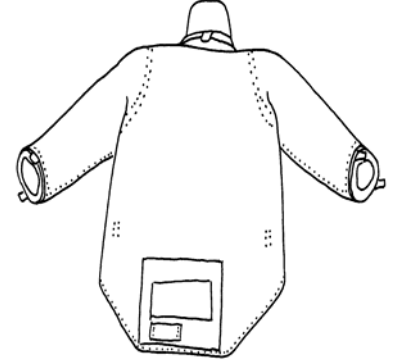
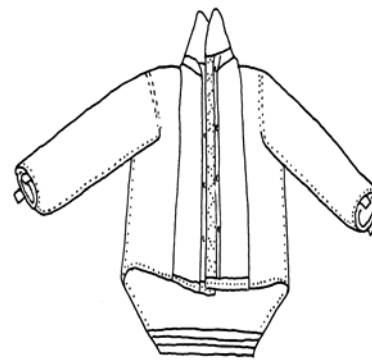
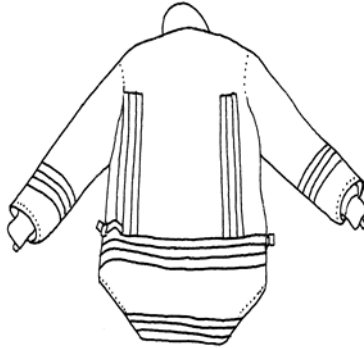
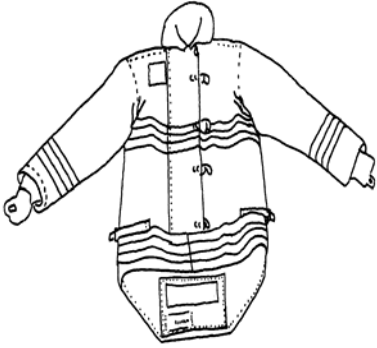
Coat Outer Shell

Front

Back

Front (Inside Out)

Back (Inside Out)



Notes

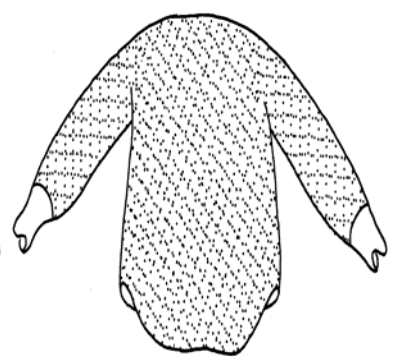
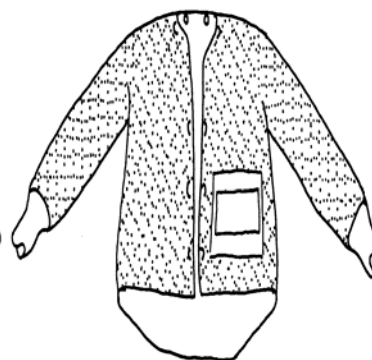
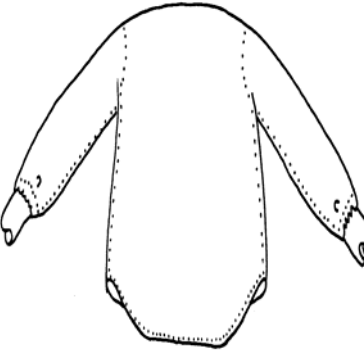
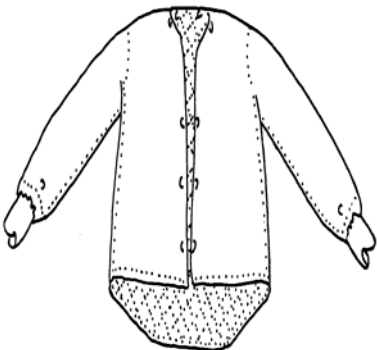
Coat Liner

Front

Back

Front (Inside Out)

Back (Inside Out)



Notes



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PANT INSPECTION DIAGRAM

X location and make brief note of type of repair needed.

Employee Identification Number	Name			
Serial #	Date of Mfgr	Manufacturer	Waist	Inseam

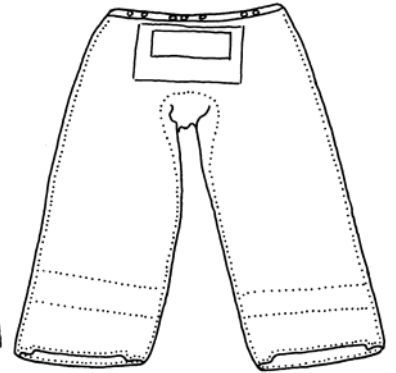
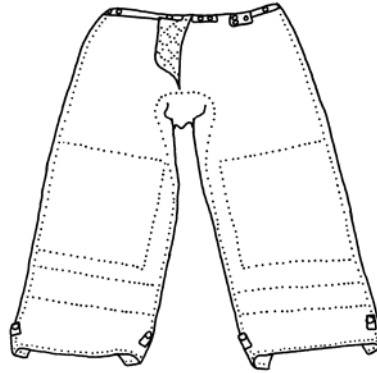
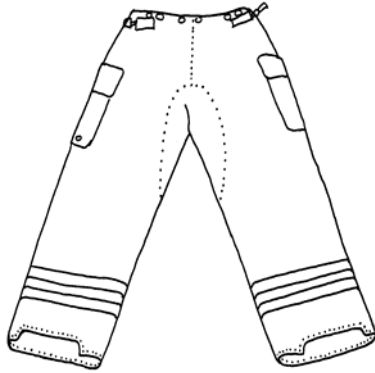
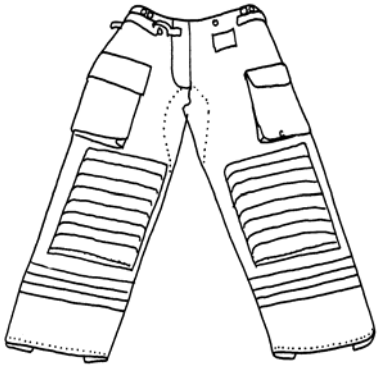
Pant Outer Shell

Front

Back

Front (Inside Out)

Back (Inside Out)



Notes

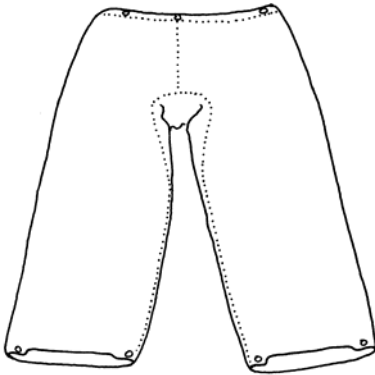
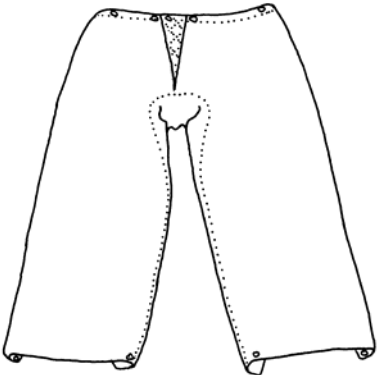
Pant Liner

Front

Back

Front (Inside Out)

Back (Inside Out)



Notes
