

# 911 REFLECTIVE ADDRESS SIGN ORDER FORM

Please mail the **completed order form** along with a check for **\$15.00** to:

**Salem Volunteer Fire Company**  
424 Hartford Road  
Salem, CT 06420

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_

State \_\_\_\_\_



Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Best Contact Time \_\_\_\_\_

E-mail Address \_\_\_\_\_

ADDRESS #:

SIGN ORIENTATION:  Horizontal   Vertical 

COLOR PREFERENCE:  **GREEN**  **BLUE**

**Questions?** Please call the **Salem Volunteer Fire Company** at **860 859 0942**