



District **FAX ORDER FORM**
Contracts Administration Office **District 6 - Miami**
Phone 305-470-5457 **E-mail** d6.contracts@dot.state.fl.us
Fax Number 305-470-5309

Company Name _____

Email Address (To Receive Addenda Notifications): _____

We accept VISA, MasterCard, Discover and American Express

Credit Card Number N/A **Exp. Date** N/A

Authorized by: N/A **Vendor No. VF**

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Street _____ **City** _____ **State** _____ **Zip** _____
Phone No. _____ **Fax No.** _____

Ship to (If different) N/A **Company** _____ **Contact - Name** _____
N/A N/A N/A

Street _____ **City** _____ **State** _____ **Zip** _____
Ship to: **Phone No.** N/A **Fax No.** N/A

FDOT ships by UPS Ground or USPS. Allow 1-5 business days for delivery.

To Request Next Day Delivery Check Either: FedEx or UPS **Provide Acct. No.** N/A

Letting Date	Proposal Number or Financial Project Number	Plan/Specs & Bidding Document (Prime Contractor)	No. Sets of Plans/Specs Only	No. Sets of Plans Only	No. Sets of Specs Only
04/09/2015	Z-6083	X	N/A	N/A	N/A

Signature required for receipt of the above records:

I, personally, and/or as representative of the above entity, fully understand the exempt nature of the public records I am receiving and agree to maintain the exempt status of this information in accordance with Florida law.

Name of person receiving records:

(Printed) _____

Signature _____ **Date** _____