

PHENIX TECHNOLOGY

9-11
CUSTOM

WE WILL NEVER FORGET COMMEMORATIVE HELMET ORDER FORM

DATE OF ORDER _____

NAME _____ SHIP TO: _____

ADDRESS _____

PHONE(____) _____

SELECT HELMET STYLE:

TRADITIONAL LEATHER

VERSION: **NFPA** _____ OSHA _____

ITEMS HIGHLIGHTED IN **RED** ARE COMPONENTS REQUIRED FOR NFPA COMPLIANCE

SELECT EYE PROTECTION OPTION:

1. HELMET COLOR: BLACK

2. SUSPENSION: RATCHET

3. EAR/NECK PROTECTION: **DETACHABLE EARLAPS (NFPA)** _____ NONE (OSHA) _____

4. CHINSTRAP: POSTMAN SLIDE

5. REFLECTIVE TRAPS: LIME/YELLOW (NFPA)

6. **EYE PROTECTION GOGGLES: ATAC (NFPA)** _____ **ESS (NFPA)** _____ NONE (OHSA) _____

8. FRONT ID SHIELD: CUSTOM HAND PAINTED BY SHARON D'ALESIO

SPECIAL INSTRUCTIONS: _____
