



2021 SMARTBOX[®] SYSTEM ORDER FORM

Grower Information *(Please print and fill out completely)*

Required for warranty and system updates.

Farm Name: _____ Date: _____

Farmer Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone _____ Cell: _____

Email *(A valid email address is required to process the order.):* _____

Shipping Information

Company or Farm Name: _____ Farmer Name: _____

Shipping Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

AMVAC[®] Territory Manager

Name: _____

Where do you plan to purchase insecticide? _____ Location: _____

Order Placed By

Name: _____ Company: _____

Planter Information *(Check appropriate boxes)*

John Deere[®] Kinze[®] Case IH[®] AGCO[®] White[™] Great Plains[®] Monosem[®]

Planter Model Number: _____ Number of Rows: _____ Row Spacing: _____ Tractor Make/Model: _____

Planter Configuration (check one): 3pt/Mounted 2pt or Drawbar

Folding Configuration (check one): Front-Fold 90° Wing-Fold 180° Rigid Pivot Vertical Stack-Fold

Central Fill/Commodity: Yes No 3 Bushel Boxes: Yes No Standard 1.6 Bushel Box: Yes No Twin/Split Rows: Yes No

Will you need brackets or lift kit? Yes No *(If yes, please fill out separate bracket order form)*



Row Shutoffs (Please write quantities)

\$275 Electric driven seed meters (covers two rows)

\$235 Electric driven seed meters (covers one row)

\$25 Electric seed clutches for non-electric driven seed meters (covers one row)

Make/model of seed clutches:

Note: Not all row shutoffs are available from AMVAC®

Pricing

System Total:

Row Shutoffs Total:

Bracket Total:

Misc. Total:

TOTAL

Special Installation Instructions

Payment Options

Standard

Discounted Pre-Shipment Payment

IMPORTANT: Discounted pre-shipment payment must be made within 30 days of order or order may be subject to cancellation. Sales tax exemption form must be filled out, signed and submitted with order/payment or sales tax will be charged.

Check Number:

Amount:

Name on Credit Card:

Credit Card Number (VISA/MasterCard):

Expiration Date (MM/YY):

Security Code:

Make checks payable to: **AMVAC Chemical Corporation** | Remit checks to: AMVAC SmartBox Orders, 375 E. Prairie Street, Crystal Lake, IL 60014

Farmer Signature:

Date:

To place an order, call 1-888-762-7826 (option #1), fax 815-479-9975 or email SmartBoxOrders@AMVAC.com.

AMVAC Chemical Corporation reserves the right to change pricing without notice.