

Drakeville Volunteer Fire Department



REFLECTIVE HOUSE NUMBERS ORDER FORM

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Address Number Requested

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Note: If you address has fewer than 4 digits please place an X in boxes not used.

Make Checks Payable to:

Drakeville Vol. Fire Dept., Inc.

Mail to:

P.O. Box 2069
Torrington, CT 06790

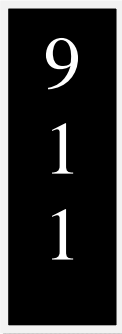
ONLY

\$20.00 for sign only

\$25.00 installed*

***plus cost of hardware.**

Installation available in Torrington Only



Please circle the sign indicating your choice of vertical or horizontal.

***FREE INSTALLATION FOR SENIOR CITIZENS**