

Phenix Wheels Order Form

CONTACT INFORMATION:

Name _____
Address _____
Phone number _____
E-mail _____

WHEEL INFORMATION:

Vehicle _____
Wheel _____
Number of wheels _____
OEM After Market
Description of work to be performed:

PAYMENT INFORMATION:

- I have enclosed a money order or a cashiers check in the amount of _____
 Please charge my Visa or MasterCard: Visa MasterCard
Card number _____
Expiration date _____
3 Digit Security number _____
 Please call me for a payment with Visa or MasterCard over the phone at
(____) ____ - ____ before you ship the wheel(s) back.

SHIPPING ADDRESS:

Same as contact information
Name _____
Address _____
Phone numbers _____
E-mial _____

Please DO NOT ship tires. Send Wheel(s) ONLY! Do not send center caps. We will NOT repair or refinish any wheel that we deem as unsafe! Your SAFETY is important to us!

Enclose a copy of this form with each wheel so that we may track all of your wheels.

For questions regarding the status of your order any other inquiries, feel free to call us
at **(401)623-8585** or email us at **support@phenixwheels.com**

Ship to: **Phenix Wheels**
716 Centre of New England Blvd
Unit 201
Coventry, RI 02816