

**STATE OF IOWA  
MODULAR SEALS/MODULAR INSTALLATION SEALS  
ORDER FORM**

**PLEASE ALLOW TWO WEEKS FOR SHIPMENT OF SEALS**

\*Please print or type and fill out form completely

THIRD PARTY AGENCY: \_\_\_\_\_

THIRD PARTY CONTACT E-MAIL ADDRESS: \_\_\_\_\_

MANUFACTURER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

MANUFACTURER CONTACT E-MAIL ADDRESS: \_\_\_\_\_

**MODULAR COMPLIANCE SEALS:**

NUMBER OF SEALS ORDERED \_\_\_\_\_ @ \$30.00 Each = \$ \_\_\_\_\_

**MODULAR INSTALLATION SEALS:**

NUMBER OF SEALS ORDERED \_\_\_\_\_ @ \$15.00 Each = \$ \_\_\_\_\_

Total Enclosed: \$ \_\_\_\_\_

\_\_\_\_\_  
DATE OF ORDER: \_\_\_\_\_

**SIGNATURE**

\_\_\_\_\_  
**NAME AND TITLE (PRINT)**

Checks must be made payable to the "Treasurer, State of Iowa" and forwarded with this order form to the address listed below:

Iowa Department of Public Safety  
Division of State Fire Marshal  
State Building Code Bureau  
215 E 7th St  
Des Moines, IA 50319  
Phone Number: (515) 725-6145

**\*FOR OFFICE USE ONLY:**

Date Order Received	Number of Seals Ordered	Check Number	Amount of Check	Date Order Sent