



Saving Lives One Storm At A Time

7661 Hwy P
Neosho, MO. 64850

****Contract For Purchase****

417-782-1039

sales@twistersafe.com

Customer name _____ date ____/____/____ telephone# _____

Address _____ city _____ state _____ zip _____

Safe Room Size _____ _____ _____

Safe Room to be installed on customer's concrete _____ Yes _____ No If Yes
Twister Safe LLC. Makes no warranty written or implied as to the concrete strength.

Price _____

In this area please draw the safe room and how it will be setting, door open
and other necessary information . Twister Safe will build safe room per drawing

Dead Bolt Added _____

Low-voltage lights _____

Bench Added _____

115 AC Outlet Added _____

Safety Hatch _____

Misc. _____

Misc. _____

Delivery Charges \$ _____

Total \$ _____

Twister Safe LLC. Requires One Half Down With Order ****Half Down \$ _____**

The Half down is non refundable see note **

Approximate Delivery Date _____

Balance Due When Shelter Is Installed \$ _____

Check # _____

Credit Card (Please Circle One = MC---Visa---Discover card

Card Number _____

Exp Date ____/____/____

Customer Signature _____ date ____/____/____

The Safe Room Is Installed, Completed and Okayed by _____ date ____/____/____

Twister Safe LLC. Warranty Valid only If Twister Safe Does the Complete Installation.

****Twister Safe LLC. may at our discretion cancel this contract and refund any or all of the down payment !!**