



# 4" X 8" ENGRAVED PAVER ORDER FORM

Receipt #	_____
Cash	_____
Check #	_____
Location	_____

Purchaser's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

**LOCATION:** CLOCK SITE and SOUTH PLAZA

Brick as shown below at \$75 \_\_\_\_\_ Brick

**MAKE CHECK PAYABLE TO:** City of Dillon

RETURN FORM TO: City of Dillon, Attn: Tina Scott, PO Drawer 431, 401 W. Main St, Dillon, SC 29536

Phone: 843 774-0040 ext. 1010 Fax: 843 774-0050

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Up to 3 lines per paver. 16 characters, punctuation and spaces per line

**YOU MUST INDICATE WHERE YOU WANT YOUR PAVER PLACED BY LOCATING IT ON THE STREETSCAPE MAP WHEN YOU TURN IN THE FORM AND PAYMENT NO LATER THAN MARCH 15, 2019.**

We regret that we cannot place pavers in exact locations they will be located in the general area indicated.