



800-337-7017

888-344-8121 Fax

order@echowaterionizer.com

Check Order Form

Full Name _____ Phone # _____ - _____ - _____

Shipping Add. _____ City _____ State _____ Zip _____

Check# _____ Email Address: _____

Order: *Free Shipping on orders over \$500.

1. ___ Echo 9 Under sink \$3195.00 (includes Digital Faucet)

Specify Faucet Finish: ___ Satin ___ Chrome

Digital Faucet Only (No Ionizer) \$500 ea.

2. ___ Echo 9 \$2695.00

3. ___ Echo Mist (handheld H2 & Sterilization water generator) \$199 ea.

4. ___ Echo H2 Tablets \$59.95 ea. Bottle of 60

5. ___ Echo Replacement Filter \$99 ea.

6. ___ H2 Blue Reagent \$30 ea.

I agree to pay \$_____. I understand that there is a 30 day return policy that is explained on the company's website.

Signature X _____ Print Name: _____

Address to mail check:

Make check payable to: Echo Water, 1404A Hamlin Ave., Saint Cloud, FL 34771

Sales Agent # _____

Installation Needed? ___ Y ___ N.

Installation Questions: Granite counter top? ___ Yes ___ No.

Is there an electrical outlet under the counter? ___ Y ___ N. (outlet must be always on)