



Request for Wood Packaging Stamping Service

Company Information

Company Name: _____

Mailing Address: _____
 Street or P.O. Box City State Zip

Billing Address: _____
 Street or P.O. Box City State Zip

Physical Address: _____
 (For Stamping Service) Street City State Zip

Business Phone: _____ **Email:** _____

Primary Contact: _____ **Title:** _____

Stamping Service Request Information

Heat Treated Lumber / Timbers Purchased for Wood Packaging Construction

Lumber / Timber Sizes (thickness x width x length)	Invoice (v)	Photo (v)	Agency Name	Mill No. or Mill Name	Quantity

Wood Packaging Items to be Stamped:

Type (Box, Crate, Skid, Pallet, etc.)	Approximate Size (width x height x length)	Quantity

Estimated Date of Completion and Ready for Inspection:

Stamping Service Requested by: _____
 (Print Name)

 (Signature) _____ (Date)

NELMA Office Use ONLY

Service Request Received: _____ Request for Service Form Sent: _____

Completed Service Form Received: _____ Official Approval (Date & Initials): _____

Inspector Assigned & Date Notified: _____

Stamping Service #: _____ Inspection App #: _____

Return Completed Request to NELMA
Fax (207-829-4293) or Scan / Email to (info@nelma.org)