

SAFEVISION, LLC SPECIALTY SAFETY GLASSES ORDER FORM

All Frames & Lenses are certified ANSI Z87 for Safety

Please print this form and mail or fax to us with your prescription. Call us if questions: 314-961-7406 / 888-254-7406

If the pupil distance isn't on your Rx, call your eyeglass professional and write the measurement on your Rx.

Fax Orderform & your Rx to 314-558-1102 or mail to:

SafeVision, LLC, 8045 Big Bend Blvd #110, Webster Groves, MO 63119.

Your Name _____

Day Phone # _____ Evening Phone # _____

Address _____

City _____ State _____ Zip _____ Email _____

Select your safety frame & prescription safety lenses below:

Circle your frame choice below & write price in box→	Enter Price Below
Uvex Astro: \$40	\$
SW06: \$60 Circle: Brown/Orange or Black/Yellow* *(recommended when ordering dark tinted or polarized lenses)	
Eagle: \$50 Circle size: 56mm or 59mm (extra wide)	
OG137S: \$50	
Stealth (mask & insert): \$60 (\$40+\$20)	
Polycarbonate Prescription Safety Lenses: Circle your choice below and enter the \$ amount -----> Single Vision-\$70, Lined Bifocal-\$90, Std. Progressive-\$135 Premium Progressive - \$170 (SolaOne®, wider near zone, less distortion)	<i>(Enter the \$ amount for your prescription lenses below)</i> \$
Multi Layered Anti Reflective Coating (both sides) add \$60	
Transitions (circle: Grey or Brown) add \$70	
Polarized Sun Lenses (circle: Grey or Brown) add \$70	
Tinted Lenses (circle Grey or Brown, circle Light or Dark Tint) add \$15	
Drivewear® Single Vision add \$195, Progressive add \$320	
TD2 Premium Anti Scratch Coating, add \$44	
Premium Anti Fog (PAF), (note: anti-fog can't share lens with AR or TD2) See www.safevision.net/paf Add \$70-1yr anti-fog or \$105-2 nd yr anti-fog extended warranty	
Zippered Hard Case: Protects your investment, add \$15	
10 DeFog-It Anti Fog Wipes, Add \$20 (see www.safevision.net/paf/defogit.html)	
Rush: Glasses manufactured in 1 week: Add \$30	
USPS Ship Costs: \$8 Ground, \$18 2nd day, Canada: \$20, AK or HI: \$12, All Others: \$40	
Subtotal of all costs	\$
Payment Method: MC Visa Disc Amex	
Name on Credit Card:	
Credit Card Number:	Exp. Date: 3 digit code:
Billing Address & Zip:	
Note: All prescription sales are final. Should a warranty inspection be required please call us at 888-254-7406 or 314-961-7406 to obtain a return authorization number.	
Return policy: see www.safevision.net/policy.html	Questions/Comments:

Note: Your Pupil Distance (PD) must be on your prescription or your order will be delayed. If PD is not on prescription, call your eyeglass store and obtain your PD and write it on your prescription for us. Additional costs added for prescription items as follows: Prism: \$10, Sphere >6: \$20, Cylinder >2: \$10.