



PO#
(internal use only)
Date:

On-Line Automotive Tire Ordering Form

Customer Information:		
Veteran O VA Employee O	VA Employee Veteran (Both)	
Name		
Date Canteen# o	r VA Hospital	
Home Street Address		
City	State Zip	
Phone Number (Home\Cell)	Work Number	
E-mail Address		
Product Information: For fastest service, reference Brand/Manufacturer Tire product code (Goodyear only) Tire Article # Firestone/Bridgestone/Primewe Tire Size (i.e. 235/55/17)	Quantity II/Fuzion only	
Preferred Service Center Address		
Payment Information:	VA Employees Only:	
Pay with Credit Card (Customer Service will contact you for your credit card payment over the phone.)	Pay with EPD Last 4 EPD# (Optional) Last 4 SSN# (Required)	

Download this form and attach in an email to VCSEmailOrders@va.gov