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CUSTOM LANCE APPLICATION AGREEMENT

Project Name:	Contact Name & Phone No.:
Installation Date:	Email:
PO #:	Purchasing Distributor:
Custom LANCE Part # and Quantity†:	

Specification Certification:

I hereby confirm that the custom LANCE LED troffer retrofit kit, Part Number(s) referenced above†, has been received, installed, and confirmed to be a proper fit. I understand that it is my responsibility to notify the manufacturer of any design changes needed prior to submission of a Purchase Order. Once the Purchase Order has been submitted and product manufactured, I understand that any further changes I request could result in additional charges, up to and including the scrapping of all manufactured goods prior to notice received and any additional engineering or material costs associated with enacted changes.

Signature	Date
Name (Printed)	
Title	
Company	

Signature	Date
Name (Printed)	
Title	
ILP	