



Order Form

Date	
Applicant Name	
Applicant Address	
Mailing Address	
Telephone Number (day)	(night)
County of Property	PWP Number
Acreage of PropertyProperty o	or Club Name
*************	**************************************
above mailing address. I agree that as post these signs along the access areas throughout the year. I have enclosed a	PROPERTY WATCH SIGNS to the part of the Property Watch Program, I will sof the property and maintain these signs check or money order made payable to the sin the amount of \$2 per sign to cover the his.
Applicant Signature	Date
USER CARDS to the above mailing add Program, these cards will be carried o property. I have enclosed a check or m	ackets (10 per packet) PROPERTY WATCH dress. I agree as part of the Property Watch on the person of the allowable users of the money order made payable to the S.C. Deamount of \$2 per packet to cover the cost of
Applicant Signature	Date





Order Form

Date						
Name						
Mailing Addr	ess					
Telephone Nu	mber (day)		(night)			
PWP Number	erProperty or Club Name					
*****	******	*****	******	******	******	
		•	de payable to tl	-	partment of	
Sign Size	Material	Contains	Cost Qua	antity	Total\$	
11.5" X 11.5 "	Poly Sign	1 each	2.00 X	= \$_		
5.5" X 5.5"	Metal Sign	1 each	\$2.00 X	= \$_		
Membership	Cards	10 each	\$2.00 X	= \$_		
			T	otal Due: \$_		

Mail Order form to:

SCDNR - Property Watch

P O Box 167

Columbia, SC 29202

Any further questions please contact: 803-734-4002