



3 RE Quality Services, **Retipping, Resharpener, Reuse, Trade-in Services**
 48 Briarwood Dr, St Catharines, Ontario, Canada L2S 4A6 1-905-641-0975 1-905-988-8992(Cel)
 retipping@mydentalcanada.com jongyoong@mydentalcanada.com
REPAIR ORDER FORM, www.mydentalcanada.com

Please clearly print in the blanks on this order form; Complete and e-mail or fax to us for expedient service.

Qty	Manufacturer Name	Instrument Name	Description of Instrument to be Sharpened, Tips Requested or New Item	Desired -Service						Amount
				N - New R- Retip S - Sharpen T Trade-in			S	T	N	
				Retip:						
As is	To Handle	Convert instruments								
Please make our instrument blades as follows:										
Please circle the following..... Normal Thicker Thinner Longer Shorter										
Subtotal										
If your instrument cannot be re-tipped, should we replace it with a new instrument at a reduced trade-in price? Please circle the following YES or NO If you mark No we will return without work done. If instrument will be replaced would you like the old instrument returned YES or NO If requesting SHARPENING, should we RETIP instruments we are unable sharpen? YES or NO								Shipping\$ _____ Handling\$ _____ HST \$ _____ Total:\$ _____		

Please Circle two options : pick-up or send us and deliver it or ship it - Service at variable rate, Contact: Jong, 9056410975, retipping@mydentalcanada.com DropBox Available

Customer Info

PURCHASE ORDER # _____

Contact Person	Company Name
Ship to Address	Phone
	Fax
	E-mail
	Have you recently moved or changed your phone number? YES OR NO If so, please provide previous phone number used.
Shipping & Handling Fee Total:	Total Amount:

Payment Option - Credit Card or Check - due on receipt

Credit Card	VISA MASTERCARD	Number	Expiration Date
	AMERICAN EXPRESS	Holder Name	
Authorized Signature			