Dental USA
Exceptional Quality & Value
The Highest Quality Dental Instruments Manufacturer www.mydentalusa.com info@mydentalusa.com
5005 McCullom Lake Road, McHenry, IL 60050 Toll-free 866-439-3400 Tel 815-363-8003 Fax 815-363-3545

REPAIR ORDER FORM

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

Qty	Manufacturer Name	Instrument Name	Description of Instrument to be Sharpened, Tips Requested or New Item	Desired –Service N - New R- Retip S – Sharpen T Tride-in						Amount
				Retip:			S	T	N	
				As is	To Handle	Convert instruments				
Please make our instrument blades as follows: Please circle the following..... Normal Thicker Thinner Longer Shorter										
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							Subtotal NOT including shipping, replacement or service changes			

PRICES DO NOT INCLUDE SHIPPING AND HANDLING CHARGES FOR YOUR ORDER.

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.

Payment Option

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