BenchPing

Sharpening service intake

ORDER / BATCH REFERENCE

CUSTOMER / BUSINESS

DATE

PHONE / EMAIL

RETURN METHOD

ITEM / TYPE	QTY	IDENTIFYING DETAILS	REQUEST / NOTES

CUSTOMER SPECIAL INSTRUCTIONS (REQUEST ONLY; SHOP CONFIRMS ACCEPTED SCOPE)

REQUESTED COMPLETION / RETURN DATE

CONFIRMED BY SHOP: YES / NO

SHOP-REVIEWED AUTHORIZATION / TERMS

CUSTOMER SIGNATURE

SHOP REPRESENTATIVE