



382 Homestead Drive - North Tonawanda, New York 14120

716-807-6069

info@shearmobility.com www.shearmobility.com

Sharpening/Repair Service Form
for the Grooming Industry

Date: ___/___/___

Type	Qty.	Fee	Subtotal
Clipper Repair (Andis & Oster) + parts* <small>*parts to be billed separately</small>	_____	\$15 + Parts	\$ _____
Standard Grooming Scissors	_____	\$5 / each	\$ _____
Convex / Hollow Ground Scissors	_____	\$18 / each	\$ _____
Clipper Blade Set	_____	\$5 / set	\$ _____
Large Animal Blades	_____	\$7 / set	\$ _____
		SubTotal	\$ _____
		Sales Tax for NYS Orders (SubTotal x 0.0875)	\$ _____
		Shipping on Orders \$50 or more	\$ FREE
		Shipping on Orders Under \$50	\$9.00
		TOTAL DUE	\$ _____

Comments / Special Instructions

Payment Options

Check / Money Order Enclosed - Amt Enclosed \$ _____

Please make payable to 'Shear Mobility'

Visa / Mastercard



Name on Card _____

Card No. _____

Exp. Date _____ 3 Digit Security Code _____

Billing Address _____

City _____ State _____ Zip _____

Authorized Signature *X* _____

Return Shipping Information

Name _____

Company Name _____

Address _____

E-Mail _____

City _____ State _____

Zip _____

Phone () _____

Insure Package? Y N Amount \$ _____

*if left blank package will NOT be insured

Please keep a copy of this for your records - This is your receipt!

A "Shear Mobility" receipt will be issued and sent with your return of equipment.

Thank you for your business!