



The Dentist's Choice

10090 Amsden Way • Eden Prairie, MN 55347

952-322-7384

HANDPIECE REPAIR ORDER

Date: _____

Clinic Name: _____

Address: _____

City/St./Zip: _____

Contact Name: _____

Telephone #: _____

#1 Model: _____ Serial: _____

- Excessive Vibration/Noise
- No Torque
- Bur Falls Out
- Stuck Bur
- Other: _____

#2 Model: _____ Serial: _____

- Excessive Vibration/Noise
- No Torque
- Bur Falls Out
- Stuck Bur
- Other: _____

#3 Model: _____ Serial: _____

- Excessive Vibration/Noise
- No Torque
- Bur Falls Out
- Stuck Bur
- Other: _____

#4 Model: _____ Serial: _____

- Excessive Vibration/Noise
- No Torque
- Bur Falls Out
- Stuck Bur
- Other: _____

- Proceed with repair
- Call with estimate*

*We only call with estimates if repairs are over our standard cost.

Email* _____

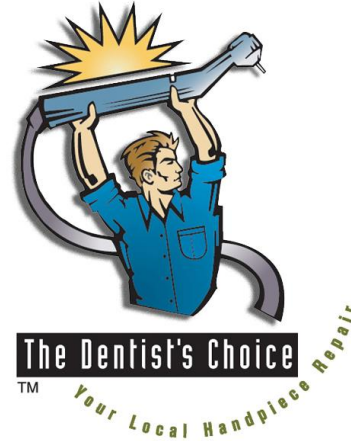
*for return shipment notification

Include this form with your handpiece(s).
Please make a copy for your records.



Contact us at:

mike.b@thedentistschoice.com
www.handpierepairmnmwi.com
(952)322-7384



Please carefully pack all items in a box.

Fill out the work order to the left with all information about the repairs needed.

Make a copy of the repair order for your records, put one in the box along with the items needing repair.

Cut out the postage paid Business Reply Label below and securely tape it to your box.

(cover all paper with tape to protect the ink)

Remove or block out any previous address labels on the box so that your package gets to the correct destination.

Questions? Please call (952) 322-7384

Thank You for your Business!

Mike Bellefeuille
The Dentist's Choice
Eden Prairie Minnesota



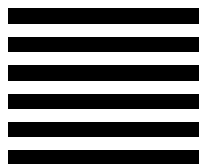
From: _____

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY LABEL

FIRST-CLASS MAIL PERMIT No. 256 IRVINE CA

POSTAGE WILL BE PAID BY ADDRESSEE



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EDEN PRAIRIE MN 55347