

Knife Service Request Form

Mail in printed knife service form with your knives to: 57 Warren Street • New York, NY 10007

Name: _____

Mailing Address: _____

Mobile #: _____

Work/Home #: _____

Email: _____

Purchase Insurance amount _____

Qty	Service Type (S) (MR) (J)	Item Description	Right or Left handed	Knife's Handle Condition	Accessories	Price

Total (before tax and shipping):

Service Type: S = Normal western knife sharpening service \$25, MR = Major western knife repair \$35, J = Traditional Japanese (single sided) knife sharpening/repair \$65

If you are unsure of your knife style or the type of service is needed, please contact customer service.

Credit Card Name: _____

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____