

SHID TO:

Bowen Products Limited Unit 1b-30528 Great Northern Ave. Abbotsford, British Columbia Canada V2T 6H4 Toll Free: 1-800-663-2541 Local Tel: 604-852-9415 info@bowenproducts.com www.bowenproducts.com

Canada Post Shipping System

Thank you for choosing Bowen for your handpiece repair. The following information offers you a fast and easy way to ship out your handpiece(s) via **Canada Post**. Simply complete this form, make a copy for your records and see below for shipping instructions.

Your Information

Practice Name		Date
Address		Teleph
City		Cell
Province		Contac
Postal Code		E-mail

Date					
Telephone	()			
Cell	()			
Contact Name					
E-mail					

Type of Repair

Please indicate code and match with appropriate handpiece below.

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Repair as required. No estimate needed.



Call with a free, no-obligation estimate before repairing.



Warranty repair with warranty card enclosed.

Handpiece Information

NOTE: Prior to shipping, all handpieces **MUST** be sterilized, no exceptions will be made!

No.	Handpiece/Model	Handpiece Serial #	Description of Repair	Type of Repair		pair
1				□A	□В	□с
2				□A	□В	□с
3				□A	□В	□с
4				□A	□В	□с
5				□A	□В	□с
6				□A	□В	□с
7				□A	□В	□с
8				□A	□В	□с
9				□A	□В	□с

Shipping Instructions

- 1. We welcome you to recycle your existing supplies. Feel free to re-use a padded envelope or small box to safely and securely package your sterilized handpiece(s).
- 2. Insert your sterilized handpiece(s) in your chosen packaging, along with a business card and this completed shipping sheet.
- 3. Send your chosen package to Bowen per above left address this page and be sure to include your return address on the shipment. Lastly, simply drop off at your local Postal Outlet or Canada Post pick-up box.

For all inquires please contact us directly at 1-800-663-2541.

Streamline Your Accounting!

Simply complete and return this form authorizing Bowen to auto-debit your credit card prior to return shipping. We will include the credit card receipt and paid invoice with all handpiece repairs/catalogue orders.

□ VISA			
CARD NUMBER		EXPIRY	CVV
CARDHOLDER NAME	SIGNATURE	DATE	