

# **Indexable Tool Repair Form**



**Deliver To:**

**MetalCut**

962 Dimco Way  
Dayton, OH 45458

Email: [metalcut@metalcutservices.com](mailto:metalcut@metalcutservices.com)  
Phone: **937.434.4258**  
[metalcutservices.com](http://metalcutservices.com)

**Date Sent**

**Shipping  
Value**

\$

*For shipping insurance (paid by the customer)*

**Contact Info:**

1. Company Name: \_\_\_\_\_

2. Ship to Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Customer Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Customer Contact Email: \_\_\_\_\_

Distributor Name: \_\_\_\_\_

Distributor Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Distributor Contact Email: \_\_\_\_\_

**PLEASE PRINT AND COMPLETE THIS FORM AND SEND WITH TOOLS**

Quote tool repair. Insert and hardware with be sent once order is placed.

Insert and hardware included with this form.

Special indexable tool print included.

Special indexable tool print will be sent once order is placed.

Special packaging and labeling instructions:

\_\_\_\_\_  
\_\_\_\_\_

Other information:

\_\_\_\_\_  
\_\_\_\_\_

Tools included in shipment:

\_\_\_\_\_ Qty: \_\_\_\_\_

\_\_\_\_\_ Qty: \_\_\_\_\_

\_\_\_\_\_ Qty: \_\_\_\_\_

Form Completed By: \_\_\_\_\_

Date: \_\_\_\_\_