

740 N. Rochester Rd. · Clawson, MI 48017

Fax: 248-588-9044

248-588-9055 . 1-800-347-3854

BILLING ADDRESS

Order Form

SHIP TO:

(If same as billing, write "same".)

CUSTOMER ID: Your Name Company				Name				
Mailing	Address_							
				City, State				
City, St	ate							
Zip				Circle one:				
Telephone Fax				UPS Ground UPS 2nd Day				
email _	email			UPS 3-Day	UPS Next Day			
Durcho				-				
Fulcila	se Oldel #							
Qty.	Unit of Measure	Item No.	Des	cription	Unit Price	Total Price		
METHO	D OF PAYI	MENT	ı		SUB-TOTAL			
		if credit has been establish	EST.SHIPPING					
		oney Order Enclos	sed.		TOTAL			
			re					
	λριιαιιοπ	Signatu	II &		Thai	nk you!		

HAMMER DUPLICATION FORM

Make of Piano:	Model:	Length:	S/N:	Year:					
Please specify brand of hammer desired on front of order form.									
Duplication Desired: Boring only Boring & Tapering (Gran Tails Squared (Grand) Tails Squared & Roughe	•		f Installation: _ Guide Hammer _ Every-other Han _ Mechanical Jig re:Snug	nmer Method					
Number of Sample Hammers Enclo	osed:	Number o	Number of Sample Shanks Enclosed:						
The following information is needed ONLY if you are NOT sending samples.									
Number of Bass Hammers: Angle of Bass Hammers: First Tenor is # Angle: Last Tenor is # Angle: First Treble is # Angle: Last Treble is # Angle: Angle: Angle: Angle: Angle: Bass (#1): Bass (#1): Bass (#1): Length of Bore: Treble (#88): Bass (#1): Lusing old shanks. Micrometer reading of diameter: Drill to new Tokiwa shanks. Comments:									
KEY RECOVERING FORM									
Services Desired: Keytops & Fronts Keytops Only Plastic Sharps Installed Ebony Sharps Installed Ebony Sharps Refurbish Re-Bush Both Rails Re-Bush Front Rail Only Re-Bush Balance Rail O	,								