



When Quality Counts... Experience Matters!

DENTAL & SURGICAL INSTRUMENT SHARPENING - In-Clinic Form

Jennifer Hertzoff, CVT - In-Clinic service available near **Long Beach, NY** (11561)

Anita Morford, CVT - In-Clinic service available near **Scottsdale, AZ** (85257)

Eloise Young, CVT - In-Clinic service available near **Tucson, AZ** (85735)

This section to be filled out by Sharpening Technician

- \$8 _____ Elevator/Luxator
- \$8 _____ Periosteal Elevator
- \$8 _____ Deciduous Elevator
- \$7 _____ Medium/Large Scissor
- \$6 _____ Small Scissor
- \$6 _____ Suture Scissor
- \$6 _____ Needle Holder
- \$6 _____ Hand Scaler
- \$6 _____ Hand Curette
- \$5 _____ Root Tip pick
- \$ _____ Other _____

*\$15 - Machine set up fee

*For instruments not listed here, email with picture to see if we can sharpen it.
info@pisharpening.com

***AZ Travel Fee** - \$1/mile _____

***NY Travel Fee** - \$1/mile _____ Expenses & extra travel time \$ _____ Total travel fee \$ _____

(Some urban NY areas travel fee might be higher for extra travel time & tolls, train, etc.. Email to find out what your travel fee is.

***30 Instrument minimum** - Could be more of a minimum, depending on distance - Call, text or email to check your minimum.



This section to be filled out by client: PAYMENT DUE AT TIME OF SERVICE

10% off if service is done within 6 months of previous sharpening.

Invoice will be emailed after sharpening. [Credit Card](#) payments can be made through the invoice link.

[Checks](#) to be mailed to Precision Instrument Sharpening 101 E. Park Ave. Suite #269. Long Beach, NY 11561.

Payment Method: Credit Card Check ACH

Clinic _____

Clinic Address _____

Service Date _____ **Clinic Phone Number** _____

Billing Email _____

Clinic Representative Name _____

Signature _____

**Client agrees not to hold Precision Instrument Sharpening liable for any damages*