SERVICE PARTS ORDERING FORM

ATTENTION: CUSTOMER SERVICE DEPARTMENT

IMPORTANT NOTES:

1) *Use this form for non-warranty orders only. Warranty orders must be placed by phone.*

2) *All emergency orders must be received by 1:00 pm EST.*

3) *All information must be filled in prior to submittal.*

Medical Products Contact Information:
E-mail: Orders-Medical@midmark.com
Phone: 1-800-MIDMARK (643-6275)
Outside the U.S.A: 1-937-526-3662
Customer Service Extension: 88921

Fax: 1-800-365-8631
Outside the U.S.A: 1-937-526-8392

Dental Products Contact Information:
E-mail: Orders-Dental/Vet@midmark.com
Phone: 1-800-MIDMARK (643-6275)
Outside the U.S.A: 1-937-526-3662
Customer Service Extension: 88923

Fax: 1-877-725-6495
Outside the U.S.A: 1-937-526-8214

Midmark Casework:
Customer Service Extension: 88914
Fax: 1-800-365-2499
Outside the U.S.A: 1-937-526-8247

European Design Casework:
Customer Service Extension: 88015
Fax: 1-800-257-7407
Outside the U.S.A: 1-270-651-1732

Veterinary Products Contact Information:
E-mail: Orders-Dental/Vet@midmark.com
Phone: 1-800-MIDMARK (643-6275)
Outside the U.S.A: 1-937-526-3662
Customer Service Extension: 88913

Fax: 1-877-725-6495
Outside the U.S.A: 1-937-526-8214

Attention: *This form is intended for authorized dealers and service providers. All others contact Midmark by calling 1-800-MIDMARK.*

DATE: ____/____/_____ **TIME:**_____ AM / PM
METHOD OF SHIPMENT:_____
PRIORITY:
○ **NON-EMERGENCY ORDER** *(ships within 72 hours if in stock)*
○ **EMERGENCY ORDER** *(ships within 24 hours if in stock) see note #2*

DEALER P.O. #: _____
ACCOUNT #: _____

MODEL#:	SERIAL #:	SALES ORDER #:

NAME: _____
ADDRESS:_____
CITY:_____ **STATE:**_____
ZIP:_____
CONTACT:_____
PHONE:_____
FAX:_____

SHIP TO: _____

PART NUMBER	QTY.	DESCRIPTION	COLOR

004-0755-00 Rev. B

Style A