

Full Name:

Full Address Inc Postcode:

Email Address:

Phone Number:

Make & Model of Clippers/Trimmers:

Serial Number:

Do your Clippers/Trimmers require a Service Only?
Yes or **No** (please circle requirement)

If No, please detail any problems that need assessing....

If your Blades are attached to your Clippers do they require sharpening?
Yes or **No** (please circle requirement)

Additional Comments...

Date Clippers/Trimmers Posted :