

Shami Fine Watchmaking

P: 973-785-0004 F: 973-785-0055

Repair Form

Customer Name: _____

Address: _____

City, State: _____ Zip Code: _____

Phone: _____

Email: _____

Watch Brand: _____

Reason for Service: _____

I authorize Shami Fine Watchmaking to perform the above service(s), in addition to the necessary innovations provided within the estimate, if approved.

Customer Signature: _____ Date: _____

Please mail your timepiece with this Repair Form to:

Shami Fine Watchmaking

372 Fairfield Rd

Fairfield, NJ 07004