LUKE-ARMS LLC



CUSTOMER INFORMATION

NAME:

LTC #./EXP DATE:

ADDRESS (ADDRESS, CITY, STATE, ZIP):

PHONE:

EMAIL:

 FIREARM INFORMATION

 MFTR:
 MODEL:

 CALIBER:
 SERIAL NUMBER:

		PROJECT
QTY	ITEM/SERIAL #	COLOR / DESCRIPTION / PATTERN

LUKE-ARMS LLC ORER AUTHORIZATION AND RELEASE

I authorize Luke-Arms LLC to perform work outlined in this form on the items listed above, as well as, agree to the accuracy of the described project. I hereby release and agree to indemnify and hold harmless Luke-Arms, its employees, officers, and agents from and against any and all liability, claims, demands, actions, damages, expenses and costs, including attorney's fees, court costs, and loss of judgements of any kind and nature which may result from services provided for me by Luke-Arms LLC

DATE: NAME: SIGNATURE:

LUKE-ARMS LLC - 6806 Coolidge rd., Yakima, WA 98903 - 509-930-1709