

Orthotic Refurbish and Duplicate Order Form (Please Print, Fill and Include with your Order Package)

Work Order	Description	Price Range	✓
Complete Orthotic Re-build (replace everything but the shell)	<ul style="list-style-type: none"> - Remove all cover and pads - Clean and prepare shell - Replace extras (met pad, heel pad, etc) - Replace top and bottom cover - Complete requested adjustments 	Call For Custom Quote	
Duplication (make duplicate of shell and orthotic)	<ul style="list-style-type: none"> - Remove all covers and pads - Prepare shell for duplication - Negative mold plaster poured - Negative mold modified to positive - Preparation of all materials and covers - Assembly of new orthotic - Recover old orthotic if needed - Order additional duplicates 	Call For Custom Quote	

NOTES:

Office Notes:

CC# _____ **Exp:** _____ **CSV:** _____

- We use all original quality and factory orthopedic materials in all rebuilds. We will contact you if otherwise unavailable or backordered
- Once your order is received, a qualified technician specialist will inspect the overall conditions and contact you to discuss your work order and exact cost
- Payment by credit card must be taken by phone before we process your work order. Normal turnaround time is 10 business days from when we receive it.
- Please add \$20 for return shipping. Orders over \$100 before tax will receive free return shipping with tracking, anywhere in Canada. All by mail work orders and final sale. All prices plus 13% Ontario HST taxes.

I authorize Peterborough Shoe Maker & Foot Orthotic centre to contact me for payment by telephone upon receipt and approval of my mail in work order. A payment receipt will be mailed with return order.

Print Name: _____

Return Mailing / Billing Address: _____

Telephone: _____ **Signature:** _____ **Date:** _____

SHIPPING LABEL

PRINT AND ATTACH TO PACKAGE

SHIPPING LABEL

SHIP TO:

**PETERBOROUGH SHOE MAKER & FOOT ORTHOTIC
CENTRE**

1524 LANSDOWNE ST. WEST

PETERBOROUGH, ONTARIO

K9J 2A2, CANADA

T: (705) 876 9996

E: shoe.maker@hotmail.com

FRAGILE – FRAGILE – FRAGILE - FRAGILE

RETURN SHIPPING LABEL

(PRINT, FILL OUT AND PLACE INSIDE PACKAGE WITH WORK ORDER FORM)

RETURN SHIPPING LABEL

SHIP TO:

NAME: _____

ADDRESS: _____

CITY: _____

PROV: _____ **POSTAL:** _____

TEL: _____

EMAIL: _____