



INFORMATION SHEET

Your Information:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number:_(____)_____

Your Gun's Information:

Manufacturer: _____

Model: _____

Serial Number: _____

Your Suppressor's Information:

I am sending this suppressor in for repair in the form of re-coating. Please re-coat and return. I have also included in the package a copy of my approved form 4.

Suppressor Manufacturer: _____

Suppressor Model: _____

Suppressor Serial Number: _____

Printed Name: _____ Signature: _____ Date: _____



INFORMATION SHEET

Please fill out this sheet and send it with your gun.

Please fill out one sheet for each gun you send

Please include a copy of your Drivers License in the box

Please follow shipping instructions on primalfinish.com

For suppressors, please include a copy of your form 4

We will be in touch to discuss final details before we begin the coating process.

Ship To:

Primal Finish
10496 Hwy 59w
Burlison, TN 38015
(901) 451-1249