



Watch Service Quotation Request Form

Customer Information (same as billing & return address)

- **Name:** _____
- **Address:** _____
- **City:** _____ **Post Code:** _____
- **Phone Number:** _____
- **Email Address:** _____

Watch Information

- **Brand:** _____
- **Model:** _____
- **Serial Number if know:** _____

Type of Watch: <ul style="list-style-type: none">○ Mechanical○ Automatic○ Quartz	Case Material: <ul style="list-style-type: none">○ Stainless Steel○ Gold Plate○ Nickle Plate○ Solid Gold
Type of Service Required: <ul style="list-style-type: none">○ Regular Maintenance○ Repair○ Battery Replacement○ Overhaul movement and case	Watch Features: <ul style="list-style-type: none">○ Date○ Day & Date○ Chronograph <p>Other: _____</p>

- **Description of Issues (if any):**



Authorization to Service Watch

By signing this form, I acknowledge and authorize Artists Of Time to handle and perform the requested services on my watch. I understand that while all precautions will be taken to protect my watch, Artists Of Time cannot be held liable for any potential damage, loss, or theft that may occur during the service process.

I confirm that I have provided accurate information regarding the watch and its issues.

Print Name:

Customer Signature: _____

Date: _____