



DROP SERVICE TAG

**Please bag & insert this tag into each bag. Payment due upon completion of services.
Pickup required 4 days from completion notification. Thank you!**

Contact Name _____ Date _____

Stable Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Cell Ph. _____ Home Ph. _____

Blanket Description

Make/Brand _____ Color _____ Size _____

Repair Detail & Special Instructions

New Tail Strap Black Red Green Navy Grey Pink

 Purple Brown

Leg Straps Qty 1 Qty 2 Other _____

Note: All items need to be reasonably clean for repair. All items needing repair will require will assessment.