

Please Send Form With Product in Shipment

Product Intake Form

PLEASE PRINT

Name (Last, First) _____ Organization _____

Address _____

Phone _____ Cell phone _____ Email _____

D/L # _____ FFL# _____

-----**PRODUCT INFORMATION**-----

Item #1 _____ Manufacturer _____ Model# _____

Serial # _____

COATING: **Graphics** **Cerakote** **Combination** **FINISH:** **Flat** **Satin** **High Gloss**

Design Pattern # _____ Base Color _____ Cerakote # _____

Special instructions/Details/Previous Damage noted _____

Authorize DeadEye to use pictures for advertising. **YES** **NO**

I understand DeadEye is not responsible for scope damage due to submersion. **YES** **NO**

