



**Custom  
Machining  
Services, Inc**



Please fill out entire form and fax it back attention: Service Department 219.464.2773  
Include a copy of this paper when sending the crimper freight prepaid to our **318 N. 400 E.** address

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_ Fax Number: \_\_\_\_\_

Manufacture of Crimper: \_\_\_\_\_

Model of Crimper: \_\_\_\_\_

Serial Number of Crimper: \_\_\_\_\_

Description of problem with crimper:

Circle all that apply

Would you like new springs installed on your crimper? Yes No

Would you like new seals installed on your crimper? Yes No

Would you like an ACT Controller installed on your crimper? Yes No

Please note any special instructions for this crimper:

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Prior history of this machine:

You will receive a quote before any work is done to your hydraulic hose crimper.  
Customer is responsible for freight charges each way. If you have any further questions  
about your crimper please give us a call.

Thanks,

David Harvoth  
Service Manager  
(219)462-6128  
[David.harvoth@customcrimp.us](mailto:David.harvoth@customcrimp.us)