Date Received PLEASE KEEP DRY

BY DENTAL LABOR
KARABULUT SAN.TİC.LTD.ŞTİ.
Full Service Dental Lab

LABORATORY JOB. No.

CLIENT A/C No.

TEL.

EMAIL / SMS No.

Custom made for the exclusive use of (Patient's Name) AGE

M/F

PRIVATE ☐ NHS ☐

BITE _____

TRYIN _____

RE-TRY _____

FINISH _____

SPECIAL TRAYS REQUIRED (Please tick)

	U	L
CLOSE FITTING	☐	☐
SPACED / HOLES	☐	☐

APPLIANCE REQUIRED

☐ ACRYLIC SHADE _____ MOULD _____

☐ DEFLEX *

☐ TSM ACETAL *

☐ CHROME* (Please select)

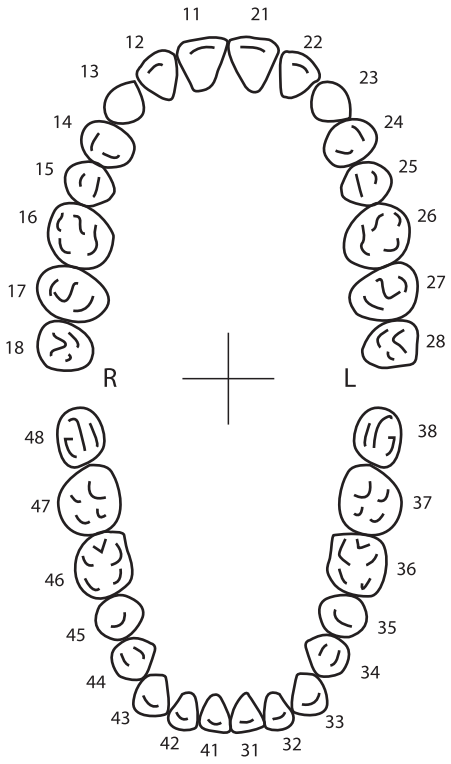
ALLOY @ BATCH No.

* Please allow 10 working days

	U	L
LAB DESIGN	☐	☐
PLATE TYPE	☐	☐
SINGLE CONNECTOR	☐	☐
MULTI CONNECTOR	☐	☐
STIPPLED FINISH	☐	☐
MIRROR FINISH	☐	☐

CLASPS

RESTS



☐ Pro-Form ☐ SIIGNATURE ☐ OTHER .....

☐ SPORTS GUARD ☐ NITE GUARD

☐ BRA. ☐ WHITE or ☐ CLEAR

PRO-FORM No. or COLOUR

☐ ORTHODONTIC APPLIANCE

INSTRUCTIONS REQUEST FOR ☐ BAGS ☐ LAB CARDS

a
b
c
d
e
f
g
h

LAB USE ONLY

1	2	3	4
5	6	7	8

Eisenbacher Dental Alloys

BEGO Partners in Progress