

J.M Boswell Repair Form

Please fill out and mail to:

Boswell Pipes

586 Lincoln Way East

Chambersburg, PA 17201

Name _____

Street Address _____

Apt. or Unit _____

City / State / Zip _____

Daytime Phone _____

Credit Card # _____

Billing Address _____

Email Address _____

Brand of Pipe _____

We accept VISA, Mastercard, Discover

We do not contact our customers unless there is a problem with the pipe. Please make sure your card number is written down. We can not ship your pipe back to you until we have your credit card information.

Please describe the problem you are having with your pipe, or provide instructions below (new mouthpiece, acrylic, vulcanite, cleaning).

Please be specific.