



Uniform Alteration and Hemming Authorization

(ACCOUNT NAME: UNIVERSITY OF OTTAWA – PARKING AND SUSTAINABLE TRANSPORTATION)

To Company/Department Name employee:

Please bring this form with your uniform item(s) to any **Stitch It** location in the Ottawa area. For a location nearest you, please visit our website at www.stitchit.com

Dear Stitch It Employee:

We are authorizing the following services for our employee's uniform.

Employee name: _____ Emp ID# _____ or New Employee _____

Service Description: **Note:** (Only services listed below are approved)

Alterations:

Crests: Shirts (name tags, shoulder crests)
Crests: Jackets (name tags, shoulder crests)
Crests: Jackets (25cm by 25cm back security patch)

Dry-Cleaning

Uniform: pants, shirts, jackets, vests

OR list alteration description:

EXPIRY DATE: _____

Stitch It Associates – Scan this code for correct charge account.



Authorized Signature

*Do not complete order unless signed and authorized by Olivier Cousineau if you have any questions, please call Corporate Accounts: Dale Beeston at 289-259-4473