

Product Repair Submission Form: Print two copies; include one in the package and keep one for your records.

First Name : \_\_\_\_\_ M.I.: \_\_\_\_ Last Name : \_\_\_\_\_

Address : \_\_\_\_\_

City : \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Day): \_\_\_\_\_ (ext.) \_\_\_\_\_ Evening: \_\_\_\_\_

Cell: \_\_\_\_\_ Fax : \_\_\_\_\_

Email: \_\_\_\_\_

Ship To (if different)

Address : \_\_\_\_\_

City : \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Product Information

Model (Name) : \_\_\_\_\_ Serial Number : \_\_\_\_\_

Reason for submission/symptoms/problem(s) occurring:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Accessories or other items included with the product:

\_\_\_\_\_  
\_\_\_\_\_

Proof of Purchase/Sales Receipt Included

Yes  No

Warranty Status

Warranty  Out of warranty  Estimate Required

**\*Include a date stamped copy of the Sales Receipt if unsure of warranty status.**

Pre-Approved Payment Information :

We accept Visa, MasterCard and American Express credit cards.

Credit Card Number: \_\_\_\_\_ Exp Date : \_\_\_\_\_

Pre Approved Repair Cost: \$ \_\_\_\_\_ (Excludes applicable freight and taxes)

I authorize the Servicing Center, \_\_\_\_\_ to charge my credit card for the "Pre-Approved Repair Cost" plus shipping.

Approval/Signature: \_\_\_\_\_ Date : \_\_\_\_\_

***Note: Unless specified, all return shipments will be "Signature Required"***