

Repairs Request Form

Equipment that has not been correctly sanitised before returning to our service agent will not be accepted.

In order for us to process your request, please ensure you fill out all of the information requested below.

CUSTOMER INFORMATION:	
Company/Business Name (if applicable):	
Site Address:	
Contact Name:	Title:
Phone Number:	Mobile:
Email:	
Second Contact (if available):	Phone Number:

PRODUCT INFORMATION:	
Date Purchased:	Invoice Number:
Product Code:	Serial Number (if applicable):
Product Description:	

REASON FOR REPAIR REQUEST::
Please describe the problem in as much detail as possible:
New or repeat problem?

FOR INTERNAL USE ONLY:			
Date received:	Warranty:	YES	NO
Warehouse assessment:			
Action required:	REPAIR	REPLACE	
Service quote:	Service cost:		
Repair / Replacement dispatched:	Date dispatched:		
			Tracking number:

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