

Ph: 02 9585 8687Fax: 02 8588 1212PO Box 624 Padstow NSW 2211Web: soundgearaustralia.com.auEmail: sales@soundgearaustralia.com.au

SERVICE REPAIR WARRANTY

Repair No:	
-	
Date:	
RA No.	
OFFICE USE ONLY	

CONTACT DETAILS

Business Name:	
First Name:	
Last Name:	
Phone:	
Email:	

ITEM REQUIRING SERVICE

Note: If more than one product requires servicing complete one service form for each product.

Brand:	
Model:	
Serial Number:	
Accessories returned with product:	
Fault Description:	

WARRANTY CLAIM

Note: if product cannot be faulted then "No Fault Found" fees and charge	rs may apply.
Original Invoice / Receipt Number:	
Date of invoice / receipt:	
Note: for all warranty claims a copy of the original SoundGear Australia in	nvoice / receipt is required to be sent back with the item.
Product to be delivered to Service Centre by: Oustomer	Courier / Post
On completion item will be: Picked up	by Customer Shipped (freight charges apply)
Business Return Shipping Address:	Residential Return Shipping Address:
Open / Trading hours of business Monday to Friday:	OR Note: deliveries to residential address require an ATL (Authority To Leave) to be provided in the event no one is home to sign for the goods on delivery. Eg "Ok to leave at front door undercover if no one home"
Once the repair has been completed you will be contacted to arra	ange the pick up of the item.
Signature	Date Date
I understand that by typing my name in this box I accept the term.	s and conditions of Soundgear Australia.

Thank you for completing our on-line service form. You will be contacted within the next 48 hours by one of our staff.