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| **From:**Company Name:      Return Address:      Contact Name:      Contact Tel:      Email:      PO Number:       (Required for Non-Maintenance requests)Radiocoms Account Number:       | **SERVICE REPAIRS FORM** *(To be completed and returned to Radiocoms with the equipment for repair)***Service & Repairs Dept.****Units 2 & 3 The Chase Centre, 8 Chase Road****London, NW10 6QD****Tel: 0844 5675670, option 2**Email: service@radiocoms.co.uk *Terms and conditions available on our website www.radiocoms.co.uk.*  |

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| --- | --- | --- | --- | --- |
| No | Item Description | Serial Number | Description of Fault | Warranty |
| 1 |       |       |       | Choose an item. |
| 2 |       |       |       | Choose an item. |
| 3 |       |       |       | Choose an item. |
| 4 |       |       |       | Choose an item. |
| 5 |       |       |       | Choose an item. |
| 6 |       |       |       | Choose an item. |
| 7 |       |       |       | Choose an item. |
| 8 |       |       |       | Choose an item. |
| 9 |       |       |       | Choose an item. |
| 10 |       |       |       | Choose an item. |
| 11 |       |       |       | Choose an item. |
| 12 |       |       |       | Choose an item. |
| 13 |       |       |       | Choose an item. |
| 14 |       |       |       | Choose an item. |
| 15 |       |       |       | Choose an item. |

|  |  |
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| Number of Batteries Included:       | Number of Aerials Included:       |
| Details of any additional items included:       |

*The equipment will be serviced and returned to the customer with its original configuration i.e. codeplug.  If the customer wishes to make any changes then this service is chargeable.*

Office Use Only:

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| Date Received:       | Service Number:       |