

CAE Sound

SERVICE REQUEST FORM - Warranty

Customer Name: _____

Do you own unit: ___ Yes ___ No - Owners Name is: _____

Make: _____ Model: _____ S/N: _____

Accessories: _____ Initials: _____

Nature of Problem: _____

YES NO

- ____ Is this an intermittent problem?
____ Was there any abuse you know of, (i.e., spills, dropped, or recently shipped.)?
____ Did the problem occur suddenly?
____ Did the problem occur while in use?
____ Was the unit stored? How long? _____
____ Does the problem show up when unit first turned on?

*******CAE is not responsible for lost Data *******

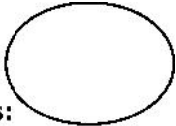
____ Have you saved your programs? Are they custom? Yes ___ NO ___

Has anyone else tried to diagnose or repair unit? If yes, please explain: _____

Cosmetic inspection:
____ SCRATCHES, dents, chips, fractures
____ Broken pots, knobs, switches, jacks
____ Damaged hardware - handles,
corners, latches, feet

Overall condition of unit
____ New
____ Used
____ Road worn
____ Other :

Estimated Value: \$ _____

I preauthorize **Special Service Fee** at \$35 / hr. YES: Customer's Initials: 

Signing here is conformation that customer has read and understands; our Basic Pricing Guide; Warranty Repair Contract and agree with the terms there in.

Customer Signature: _____ Date: ___/___/___ W/O # _____