

Fixed Price Repair - Faxback Form

Date \_\_\_\_\_ (Day) \_\_\_\_\_ (Month) \_\_\_\_\_ (Year)

Contact \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

State/County \_\_\_\_\_

Zip/Postcode \_\_\_\_\_

Country \_\_\_\_\_

Email \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Please organise a fixed price repair for the equipment outlined below. Please also find attached a purchase order for the fixed price repair, that includes the flexibility to cover the cost of a replacement card or chassis if the equipment is deemed to be damaged beyond repair as well as shipping back to your site above at UPS cost.

Purchase Order Number \_\_\_\_\_

Details of Item Being Returned

Details of Fault

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Position \_\_\_\_\_

Please fax back to your local Vocality office together with a copy of the purchase order for the repair.

All information contained in this document is for guidance only and does not form any part of a contract. Vocality operates a policy of continuous improvement and reserves the right to make specification changes.

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