Incoming Services Form

CONTACT INFORMATION

Company Name _____ Contact Name _____

Phone Number _____ Mobile Number _____

Email Address _____

Address _____

_____

PRODUCT

Brand _____ Model _____ Serial Number _____

Additional Parts _____

_____

(Please specify any parts included in your shipment ie. Batteries, remote controls, etc)

REQUIRED SERVICE

☐ Quote

☐ Repair

☐ Clean and calibration

☐ Warranty claim*

*Warranty claims are at the discretion of Spot-on.

SERVICE DETAILS

What is the problem with your product? _____

_____

_____

Has the unit been subject to impact/shock or exposed to conditions outside of the manufacturers specifications? (E.g. Weather)? If yes, please specify. _____

_____

X _____ _____ _____

Customer signature | Date | Customer support number (if applicable)

Send by courier or Australia Post (registered post recommended).
Please ensure that your product is securely packaged in a cardboard box.

For all services sent via courier (not Australia Post) please send to the following address:
Spot-on Laser & Tool Company
74 McKillop Street, Geelong, VIC 3220

For services sent via Australia Post please send to the following PO Box:
Spot-on Laser & Tool Company
PO Box 2272, Geelong, VIC 3220

Spot-on Laser & Tool Company Pty Ltd
ABN: 17 135 259 317

P 1300 658 338
E service@spoton.com.au