

Repair Number:\_\_\_\_\_

## **CUSTOMER REPAIR REQUEST FORM**

2023.7.15. Ver. 1

Please complete this form and submit it to CTS. A repair number will need to be issued <u>before</u> equipment can be sent for evaluation. \*Please note: Minimum Repair/Evaluation Charge - \$75.00 and the shipping cost to return the item if repair work in not approved.

Contact Info	<u>):</u>					
Company						
Contact Nam	ne:		Tel #:			
Email:						
Return Addı	<u>'ess:</u>					
If your compa	any has payment term	s established with CT	S, please indicat	e a PO#:	· · · · · · · · · · · · · · · · · · ·	
Company:						
City:					Zip/Postal:	
			Problem	n external power supply	•	
Make	Model	Serial #	Problem	(Please provide as muc	n detail as possible)	
Additional l	nformation, Special i	nstructions:				
Date Shipped:						
Return Shipp	ing Method:		Shipping Account #: (optional)			
Send Equip	ment To: Costa Tech	nical Services, 1 Rive	r St., Unit 107, E	rving, MA 01344		