



# REPAIR FORM

**PLEASE FILL IN EACH SECTION USING BLOCK CAPITALS**

REPAIR FORM SHOULD BE INCLUDED WITH THE UNIT IN THE BOX

## YOUR CONTACT DETAILS

FULL NAME: \_\_\_\_\_ DATE : \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE : \_\_\_\_\_ EMAIL: \_\_\_\_\_

## DETAILS OF UNIT FOR REPAIR

MAKE : \_\_\_\_\_ MODEL NO : \_\_\_\_\_

SERIAL NO. \_\_\_\_\_ *EXTRAS INCLUDED:* \_\_\_\_\_

CONDITION / DAMAGE/ MARKS \_\_\_\_\_

## LIST OF FAULTS

*PLEASE LIST ALL FAULTS HERE:*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SHIPPING DETAILS

PLEASE ENSURE ALL UNITS ARE SECURELY PACKED AND FULLY LABELLED.

SEND TO THE FOLLOWING:  
  
REVIVE CAR AUDIO  
  
THE WORKSHOP  
6 HOLBROOK LANE  
TROWBRIDGE  
WILTSHIRE  
BA14 0PR  
  
01225 442180

**PLEASE NOTE: REVIVE CAR AUDIO IS NOT RESPONSIBLE FOR ANY LOST OR DAMAGED UNITS.**