



SERVICE ORDER FORM

Return Items to: Datacap Systems, Inc.
Attn: Service Dept.
100 New Britain Blvd.
Chalfont, PA 18914
Service Type _____

Customer
Purchase Order # _____

Name: _____
Address: _____

Return
Repair to: _____

Contact: _____
Phone #: _____
Fax #: _____
E-mail: _____

Ship repaired product via: _____

Service Type Request/Authorized (Check one AND indicate on mailing label):

Type

R1 Priority Repair _____ (5 business day turnaround, 25% premium)

R2 Standard Repair _____ (30 calendar day turnaround)

W1 Warranty Repair _____ (5 business day turnaround)

Purchase Date: _____

W2 Extended Warranty Repair _____ (5 business day turnaround)

Load Network? _____ Yes _____ No

Network Load Application _____

Load Merchant Parameter File _____ Yes _____ No

Merchant File Name _____

Note: If dial-in load service was not purchased, Datacap does not maintain file, and there are additional fees for re-building parameter files

Items returned for repair / Problem Description:

Qty	Item	Serial #	Problem Description
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Special Instructions: _____

Please record the serial number of the items you are returning for repair to be used as a reference when checking on the status of repairs.

Note: Payment terms are based on current account settings. Contact Datacap Sales to make any changes (215-997-8989)