

SEAFORD WIRELESS

Diagnostic/Repair Authorization

Contact Information

CUSTOMER NAME

STREET ADDRESS

CITY

STATE

ZIP

EMAIL

PHONE

ALT PHONE

PREFERRED CONTACT METHOD

- PHONE EMAIL
 TEXT(SMS)
 OTHER

HOW DID YOU HEAR ABOUT US?

- GOOGLE BING
 YAHOO YELP
 YARD SIGNS CRAIGSLIST
 OTHER

Device Information

WHAT TYPE OF DEVICE ARE YOU HAVING REPAIRED?

- IPHONE IPAD IPOD
 SAMSUNG PHONE KINDLE OTHER TABLET
 OTHER PHONE DESKTOP LAPTOP
 GAME CONSOLE DIGITAL CAMERA PRINTER
 OTHER

DEVICE MODEL

COLOR

CARRIER

SERIAL #

PASSWORD

DESCRIPTION OF PROBLEM

Repair Price Quotation

ESTIMATED REPAIR PRICE (leave blank if unsure)

INITIAL IN BOX TO AGREE WITH ESTIMATED REPAIR PRICE

Disclaimer

My signature indicates that I give Seaford Wireless permission to service my device.

I agree that I am responsible for all fees once the services begin and will make the payment before it is shipped back or picked up in store. If the fee exceeds the estimate, a verbal authorization will suffice as my agreement to the additional fees and to proceed with the services. Additionally, I understand that ! SW Repairs will make every effort to restore my device's condition and is not liable for unforeseeable damages, any data stored on the phone, or claims of damages.

Liquid Damage:

I understand there is no guarantee for liquid treatment phones. I agree to pay \$25 or leave my phone as payment for RockIT Repairs time and labor if the phone is unrepairable.

SIGNATURE (type name here)

