



## Warranty Request Service Form

Dear Customer

To enable the Dr+Group to create an "In Warranty" claim and provide you with a Job Reference Number for your product, could you please fill out the below information:

### Product Details:

Brand: \_\_\_\_\_ Product Type: \_\_\_\_\_

Model Number: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Retailer Where Purchased: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Domestic/Commercial Use: \_\_\_\_\_

Description of the Fault: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Reseller Details:

Business Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_ Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To validate your warranty claim, we will require a copy of your purchase receipt. Please fax or email this form together with a photocopy of your proof of purchase to either of the following. Without a purchase receipt no warranty service can be performed.

### Customer Details:

Business Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_ Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_



Email: \_\_\_\_\_

Customer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**Email: [necsupport@thedrgroup.co.nz](mailto:necsupport@thedrgroup.co.nz)**

**Please Note:**

*Warranty covers manufacturing faults only. If there is "No Manufacturing Fault Found" or the diagnosis is "user error" you will be charged for the service call.*

*Goods presented for repair may be replaced by refurbished goods of the same type rather than being repaired. Refurbished parts may be used to repair the goods.*

*During the Process of repair, some or all of your stored data may be lost. Please ensure that you have saved this data elsewhere prior to repair.*