



RADIO REPAIR FORM

www.LongIslandRadio.com

631-231-0033 • service@longislandradio.com

305 Knickerbocker Ave, Suite 7 • Bohemia, New York 11716

CUSTOMER INFORMATION

Company: _____ Phone ____/____- _____

Contact name _____ Department _____

Email _____

Shipping Address _____

City _____ State _____ Zip _____

FORM OF PAYMENT

Maintenance Contract Net Account Cash/Credit Card (*Click to Download Authorization from*)

Purchase Order #: _____ Call if repairs exceed \$_____

RETURN OF UNIT:

Call When Ready Ship When Completed (*shipping charge will apply*)

Accounts Payable

I certify that I am authorized to request service listed on page 2.

Signature _____ Date _____

Printed Name _____ Title _____



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EQUIPMENT INFORMATION

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Serial Number: _____ Model # _____

Engraving: _____

Reason for Repair:

No Transmit/Receive Keypad

Display Distortion

Missing Buttons Static

Won't Hold Charge Other: _____

Intermittent (Describe): _____

Accessories Included:

Battery Charger w/cable Clip Antenna Mic

Other: _____

Serial Number: _____ Model # _____

Engraving: _____

Reason for Repair:

No Transmit/Receive Keypad

Display Distortion

Missing Buttons Static

Won't Hold Charge Other: _____

Intermittent (Describe): _____

Accessories Included:

Battery Charger w/cable Clip Antenna Mic

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Other: _____