



**REPAIR AUTHORIZATION FORM**

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

Customer Number: \_\_\_\_\_ (Required)

Bill To Address: \_\_\_\_\_

ShipTo Address: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Accts Payable Contact: \_\_\_\_\_

Receiving Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

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

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

\*Purchase Order# \_\_\_\_\_

**\*If Purchase Order (PO) Required - Repairs will NOT be processed until PO# is received.**

Credit Card# \_\_\_\_\_

Name on Card: \_\_\_\_\_

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

(Visa, Mastercard, Discovery, American Express)

Signature (Required if using Credit Card)

Total Number of Headsets/Bases (pieces) sent in \_\_\_\_\_

\*\*If more space is needed for additional information and/or details, please list on additional sheet

**What would you like us to do?**

\_\_\_\_ Repair All Items (In and Out-of-Warranty Items) Requires Signature

\_\_\_\_ Repair Only In-Warranty Items - trash Out-of-Warranty Items. Requires Signature

\_\_\_\_ Repair In-Warranty Items, contact me with Out-of-Warranty Repair Estimate. Ph: \_\_\_\_\_, Email: \_\_\_\_\_

\_\_\_\_ Repair In-Warranty Items, Offer \*\*\*Trade-In Credit for Out of Warranty

\*\*\*Trade-In Credit - You will receive an in-store credit that can be applied to future invoices. Credit amount issued is determined by the necessity and condition of the units returned for credit. Although credit amounts may vary (from \$0.00 to \$5.00 per unit), the average credit issued for acceptable units is \$2.50/unit.

**IMPORTANT**

By signing below you authorize Call One, Inc. to process the items you sent in for In-Warranty, Out-of-Warranty and/or Trade-In based upon your selection under the "What would you like us to do?" section. If you request that we contact you with an Out-of-Warranty Repair Estimate, Call One will contact you and annotate in our Customer Management system. If you do NOT respond within two-weeks, Call One will return the items unserviced and invoice you for the freight.

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

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

**IMPORTANT SHIPPING INFORMATION**

**When Shipping via UPS or FedEx:**

Call One, Inc.  
Attn: Repair Dept  
400 Imperial Blvd  
Cape Canaveral, FL 32920

**When Shipping via US Postal Service (mail):**

Call One, Inc.  
Attn: Repair Dept  
PO Box 9002  
Cape Canaveral, FL 32920