



SHIPPING, BILLING, & CIRCUIT BOARD INFORMATION

Rev. 5/12/11

Please provide us with the following information by enclosing it with your shipment.

Business Name:

Primary person to contact during office hours (Mon-Fri 9:00-5:00 EST) for billing and/or shipping questions:

NAME:

PHONE:

EMAIL ADDRESS:

Check HERE if you would like your invoices emailed **instead** of printed.

Alternate contact name and number:

BILL TO:	SHIP TO (no P.O. Boxes please):
	<input type="checkbox"/> Check if this is a residential address.

Please include machine Model No. _____ and S/N _____ (use back of form as needed)

Item(s) being sent for repair, and description of problem(s):

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TOUCHPADS: Only *some* Speed Queen touchpad replacements are free with repair. **Let us know HERE if you want us to automatically replace a non-functioning touchpad that may increase the repair price:** YES NO (If the replacement would be only for cosmetic purposes, we will call for your approval first.)

Dryer settings only: Please record your settings below because factory resets can occur.

Cycle time: _____

Cycle price: _____

Temp HI ____° Temp MED ____° Temp LO ____°

Cool-down time: _____ mins.