

# Service Work Order

| Your Name (Be sure to fill out Personal Contact info at right) |                                  |                      |
|--|----------------------------------|----------------------|
| Last Name  | First Name                       |                      |
| Make/Model/Serial Number/History                               |                                  |                      |
| Make   | Model                            |                      |
| Serial Number (if known)                                       | Date of Purchase                 | Date of Last Service |
| Approx. Dives Since Last Service                               | Approx. Hours Since Last Service | Maximum Depth        |
| Nature of Problem/Service Required                             |                                  |                      |
| <hr/> <hr/> <hr/> <hr/> <hr/>                                  |                                  |                      |



### Ship to:

Just Add Water  
36200 Euclid Avenue  
Willoughby, OH 44094  
(440) 942-7575

- Pack carefully. Enclose all items in cardboard box with adequate padding.
- Insure contents for full replacement value.

### Personal Contact Information

Where we can reach you if we need to confirm any information appearing on this form

|  |
|--|
| Daytime Phone (with Area Code)           |
| Evening Phone (with Area Code)           |
| E-Mail (Required for Orders Outside USA) |

### Billing Address

Where you receive your credit card statement

|                                 |       |                 |
|---------------------------------|-------|-----------------|
| First Name                      | MI    | Last Name       |
| Street Address or PO Box Number |       |                 |
|                                 |       |                 |
| City                            | State | Zip/Postal Code |

### Shipping Address (USA Only)

Complete the following if your shipping address is different than your credit card billing address or if your billing address is a PO Box number (Be aware that most credit card companies do not allow shipping to other than your exact billing address)

|  |       |                 |
|--|-------|-----------------|
| First Name                               | MI    | Last Name       |
| Street Address Only (No PO Box Numbers!) |       |                 |
|  |       |                 |
| City                                     | State | Zip/Postal Code |

## Read and Sign Where Indicated Below

- Just Add Water assumes responsibility for the safety and well being of your equipment only while it is in our possession. You are responsible for packing your equipment properly for shipping and insuring it for its full replacement value if lost or damaged in transit. *Claims for loss or damage in transit must be made with the shipping company, not with Just Add Water*
- Claims for service under warranty must:
  - Fall within the warranty period specified by the manufacturer.
  - Not be for damage resulting from mis-use or abuse, as defined by the manufacturer.
  - Be accompanied by either a manufacturer-issued warranty card or service record, or by a photocopy of the original purchase receipt.

Claims for service under warranty cannot be honored unless these conditions are met. Note that battery replacement is considered normal wear and tear and *is not* covered under warranty.
- By signing this agreement, you are authorizing Just Add Water to charge your credit card (or issue a COD tag) for:
  - The cost of parts and labor.
  - The cost of return shipping, using the method you have indicated on this form.
- If the cost of parts and labor will exceed any estimate given, we will contact you for authorization before proceeding.
- You must supply us with a valid USA shipping address.* We cannot ship items outside the USA.
- Just Add Water warranties all repairs against defects in parts or labor *that are a direct result of the service performed* for a period of 90 days.

By signing below, you agree to the terms and conditions outlined here.



Signature

Date

### Do Not Write Below This Line

| <table border="1"> <tr> <th>Date Received</th> <td>By</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <th>Operational Test</th> <td>By</td> </tr> <tr> <td>Date</td> <td> </td> </tr> <tr> <th>Pressure Test</th> <td>By</td> </tr> <tr> <td>Date</td> <td> </td> </tr> <tr> <th>Other Service</th> <td> </td> </tr> </table> | Date Received | By |  |  | Operational Test | By | Date |  | Pressure Test | By | Date |  | Other Service |  | <h3>Parts Used</h3> <hr/> <hr/> <hr/> <hr/> <hr/> <p>Tracking Number: _____</p> | <p>Date Shipped</p> <hr/> <p>Shipped Via:</p> <input type="checkbox"/> Ground<br><input type="checkbox"/> Second Day Air<br><input type="checkbox"/> Next Day Air<br><input type="checkbox"/> Other: _____ <hr/> <p>Parts and Labor:</p> <hr/> <p>Return Shipping:</p> <hr/> <p><b>Total:</b></p> |
|--|---------------|----|--|--|------------------|----|------|--|---------------|----|------|--|---------------|--|---|---|
| Date Received  | By            |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |
|  |               |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |
| Operational Test   | By            |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |
| Date   |               |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |
| Pressure Test  | By            |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |
| Date   |               |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |
| Other Service  |               |    |  |  |                  |    |      |  |               |    |      |  |               |  |   |   |

### Shipping Method

Ground  Second Day Air  Next Day Air

Note that repairs require an average of one week in house, from date of arrival, to complete

### Payment Method

COD  VISA  MasterCard  Discover  Amex

For credit card orders, complete the information appearing below

### Credit Card Information

Complete the following exactly as it appears on your credit card

|             |                      |           |
|-------------|----------------------|-----------|
| First Name  | MI                   | Last Name |
| Card Number |                      |           |
| Exp Date    | Authorized Signature |           |