

Date	

Dear Valued Customer, Please fill out the form below and print a copy to be sent in w	vith the product needing service. (*Note the Required fields)	
*Customer Name	*Email Address	
*Phone Number	Fax Number	
Service Request #	PO #	
Other Reference #	Customer/OEM	
Billing Address	Shipping Address (if different than Billing Address)	
Address	Address	
City	City	
State/Province Zip/Postal Code	State/Province Zip/Postal Code	
Country	Country	
Part #	RMA # (if applicable)	
Part Description		
Serial #	Date Code #	
Email for billing		
Type of work requested (check all that apply) Repair	- ☐ Warranty Claim Assessment ☐ Failure Analysis Repo	
*Description of problem or symptom:		
Task performed when problem occurred:		

By checking the box, you certify that you are authorized by your organization to submit such request and hereby accept and agree that TSI's Terms and Conditions shall apply to any service performed under this request.

If you have any questions please contact us at Technical Support and Service - djservice@dickey-john.com Monday thru Friday 7:00 am - 5:00 pm central time 800-637-3302

Ship product and Service Request Form To:

DICKEY-john® (41-0843524) A Division of TSI® Attention: Service 5200 Dickey John Road Auburn - IL 62615

Contact: exports@tsi.com for clearance instructions.