

3 Gen, Inc. Request for Repair

3 Gen, Inc.

Attn: Repairs

31521 Rancho Viejo Road, Suite 104

San Juan Capistrano, CA 92675

Date of Request: _____

Name of Contact Person: _____

Telephone Number: _____ Ext: _____

Email Address: _____

Return Address

Name of Institution: _____

Name of Requestor: _____

Street Address: _____

Suite/Bldg./Apt#: _____

City, State, Zip Code: _____

Model: _____

Serial Number: _____

Problem or Reason for Return: _____

Please be advised: For all Non-Warranty Repairs there is a \$75.00 (USD) service fee, plus shipping and parts costs. Please wipe down the exterior of your device of all oils, and or residue before sending in. You can expect your device to be serviced within 2 business days after being received at our repair facility. The warranty does not cover expedited shipping fees, please call (949) 481-6384 for expedited shipping costs. For full warranty details see our website at www.dermlite.com

Credit Card Number: _____ Exp. Date: ____/____ CVV: _____

Please indicate if you would like us to contact you with a repair estimate. Yes____ No____

*****3 Gen, Inc. ONLY*****

Date Received by 3 Gen, Inc.: _____

Investigations and Findings: _____

Action Taken to Repair: _____

Functional Test____ Optics Inspection, and Test____ Charging Test____

Type of Repair (circle one): WARRANTY NON-WARRANTY

Disposition (circle one): Unit Repaired Unit Not Repaired Unit Traded-in

If Repaired, Parts Issued for Repair: _____

If Replaced, Replacement Serial Number: _____

Date Returned to Customer: _____ Form Completed By: _____