

**REPAIR DOCKET – tetraxx Repair Center**

Please complete both sides of this form and return it, together with the faulty item, to the tetraxx Repair Center at the address given below.

Cables, leads and accessories that are not attached to the item or are not required to operate it should NOT be enclosed.

**Customer details:**

First name: \_\_\_\_\_  
Surname: \_\_\_\_\_  
Address: \_\_\_\_\_  
Postcode: \_\_\_\_\_  
Name of City/town: \_\_\_\_\_  
Country: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Phone number: \_\_\_\_\_

**Details of faulty item:**

Manufacturer: \_\_\_\_\_  
Model: \_\_\_\_\_  
Serial number: \_\_\_\_\_

**Accessories:**

- |                                      |                                    |                                    |
|--------------------------------------|------------------------------------|------------------------------------|
| <input type="radio"/> Battery        | <input type="radio"/> Bag/case     | <input type="radio"/> Other: _____ |
| <input type="radio"/> Memory card    | <input type="radio"/> Original box | _____                              |
| <input type="radio"/> Carrying strap | <input type="radio"/> AC adaptor   | _____                              |
| <input type="radio"/> Lens cap       | <input type="radio"/> Manual       | _____                              |
| <input type="radio"/> Cassette       | <input type="radio"/> Cable        | _____                              |

**Description of fault:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Repair details:**

- Repair under guarantee (please supply copy of sales receipt)
- Estimate of repair cost requested (fee chargeable if customer decides not to proceed with repair; see General Terms & Conditions)
- Authorised to carry out repairs up to a maximum of \_\_\_\_\_ EUR (including packaging, postage and VAT)

I have read and understood the terms and conditions of repair and agree to be bound by them.

---

Date      Signature of customer

**tectraxx Repair Center (formerly MCL-Service):****Contact:**

1230 Wien, Deutschstraße 19

Tel: 0043 1 79 799 7625

Fax: 0043 1 79 799 7619

E-mail: [service.vienna@tectraxx.com](mailto:service.vienna@tectraxx.com)

**Opening times:**

Mon - Weds 8am - 12 noon and 12:45pm - 4:30pm

Thurs 8am - 12 noon and 12:45pm - 7pm

Fri 8am - 2pm