

N8's Tech Services Repair Form

All Fields Required

Full Name: _____

Best Contact Phone Number _____

Email: _____

Return Mail Address: _____

Device Type & Model: _____

Screen Unlock Code: _____

***Data Recoveries/Repairs will NOT begin without unlock codes**

Services Needed Done: _____

Device Symptoms-Tell the story about how your device became in need
of repair: _____

Expected Cost (list quote given) \$ _____

In case of non-repairable I want....

1. To donate this device to be used for parts (___)
2. To get mailed back, disassembled \$0 plus return shipping (___)
3. To get mailed back, fully assembled \$25 plus return shipping (___)

By signing you acknowledge and agree to the **Client Agreement Form**,
found at N8sTechServices.com/mail-in-repair

Customer Signature _____

Date _____