

DUKANE
Audio Visual Service Request Form

Fax to Service Dept. at 630-584-0984
Email to Service Dept: avservice@dukane.com
Attn. AV Service 1-800-676-2487

Invoice No: _____ Date: _____

Purchase Order No: _____

For Dealer Use Only

Dukane Acct No: _____		
Dealer/Service Station Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Contact: _____	Phone No: _____	

End User Account No: _____

End User Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Phone No: _____

Dukane Model No: _____ Dukane Serial No: _____

Date Purchased: _____ Product under Warranty: Yes No

Description of Problem: _____

How would you like to be contacted regarding action taken?

- Phone
- Fax
- Neither

Action Taken _____

Date: _____

Dealer Purchase Order No: _____

- Unit Being Returned for Repair/ RMA # issued _____
- Replaced Damaged or Missing Parts
- Replaced with new unit/ Please use original P.O.
- Dukane Arranging Shipping Method
- Customer Requesting Credit

Technician Comments: _____
