BlueCosmo Service & Repair Centre
2130 Westlake Ave N, Ste #1, Seattle, WA 98109
Phone: 877-258-3496 Fax : 888-893-4036
Email: Repairs@BlueCosmo.com

Service & Repair Authorization Form (RMA-Repair & Maintenance Authorization)

Customer Information:

Name: _____ **Company:** _____

Return Address: _____

City: _____ **State & Zip:** _____

Phone: _____ **Email Address:** _____

RMA Information:

RMA#: _____ **Date of RMA:** _____ **Agents Name:** _____

Equipment Information:

Brand & Model: _____

Manufacturer IMEI#: Under Battery & Starting 3 0 0

Problem Description: _____

☐ Sending for Exchange/Credit/Sale ☐ Sending for Repair or Maintenance

Terms of Testing/Repair & Customer Responsibilities: ☐ In Warranty ☐ Out of Warranty**

**Minimum of $100.00 evaluation fee plus shipping cost to and from service & repair centre will be applied per item that is out of warranty (Unless otherwise stated). An additional quote will be provided to customer once repair centre has made an assessment of needed repair(s).

This form authorizes our service and repair centre to evaluate /repair all parts & equipment noted on this sheet as being defective, and it is customer's duty to make sure the part(s) are accounted for, defective or not. When shipping out, or sending in equipment for testing or repair absolutely DO NOT include any SIM Cards (this is the chip that resides under the battery or back of the unit). We are not responsible for any lost, missing, or unreturned SIM Cards.

For any item NOT under warranty, or for any unwarranted damages, the customer is responsible for costs of any repair work that may need to be performed. For equipment being re-flashed the customer agrees that, Our Service & Repair Centre, BlueCosmo, and/or Iridium are not held responsible for failure of the equipment due to the re-flash processes, as there is a possibility that the equipment could become inoperable due to software corruption resulting from the re-flash process.

Please provide credit card information to cover the costs of any work done as well as shipping costs back to the customer. If you already have a shipping account that you would like us to use, please provide that information under Return shipping method/ Account #.

_____ _____

Customer Signature (Authorizing Repair) **Date**

Payment Information (Out of Warranty Repairs Only)

Name on Card: _____ **Credit Card Type:** _____

Billing Address: _____

Card Number: _____ **Exp Date:** _____ **Security Code:** _____

Card Signature: **Date:**