

## DROP OFF SITE REPAIR FORM

Please complete this	form and bring to	o a Northwest C	amera d	rop off site	DATE with product ne	eeding repair or service
First Name: Last Name:				Day Phone:		
Address 1:				Cell Phone:		
City:		State: Zip:			E-mail:	
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Manufacturer:		Camera Information Model #			Serial #	
Manufacturer:		Model #			Serial #	
Manufacturer:		Model #			Serial #	
Manufacturer:		Model #			Serial #	
Problem Description:						
Accessories Being Ship (Check all that apply)		nory Card (Please	e Indicate	ed Model)		
Strap Lens CapBody CapEye C			Cup _	Filter	Battery	_ AC Adapter
Other (Please dea	scribe)					
Please do not send o	cases unless neo	cessary				
Estimates will be common authorization. If you wou						the customer's se fill out the box below.
Please repair/service my camera right away if the cost of labor and parts is at or below the following.				Northwest Camera & Video Repair 12720 Lake Blvd		
			P.O. Box			
				Technical questions, please call: 651-483-8588		
		Drop off I	_ocatio	ns		
Medicine Chest SunColor Photo 2187 4th Street White Bear Lake, MN 651-429-6347				Alex Audio & Video 4211 Rhode Island Ave. N. New Hope, MN 763-533-5377		

Drop off locations are not affiliated with Northwest Camera & Video Repair and not liable for any damages incurred. Northwest Camera is solely responsible for all repair work.