

SQ010 - DRYSUIT REPAIR FORM



Please send the drysuit(s) for repair to -

SAFEQUIP (SERVICE CENTRE) UNIT 9A MARQUIS COURT : PRUDHOE : NORTHUMBERLAND : NE42 6PJ

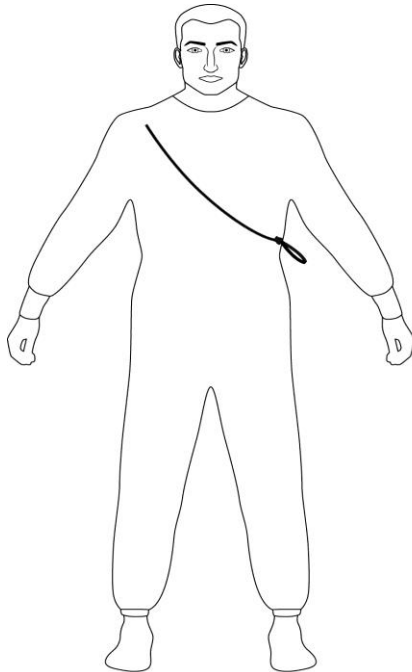
Tel: +44 (0) 1259 727835 (OPTION 3) Email: service@safequip.co.uk

ORDER NO/REF		DATE		JOB NUMBER	
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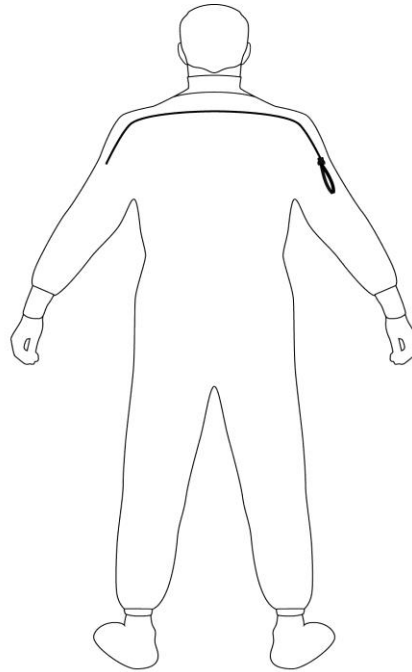
COMPANY/ORGANISATION NAME & ADDRESS (PLEASE PRINT)		CONTACT DETAILS (PLEASE PRINT)	
Name:		Name:	
Address:		Position:	
		Tel No:	
		Fax No:	
		Mobile:	
		Email Address:	
Post Code:			

If you require a formal quotation prior to any repairs being carried out, please indicate	YES	NO	Please tick the box provided if this is a warranty repair	

PLEASE MARK ON THE PICTOGRAMS THE DAMAGE OR FAULT(S)



FRONT VIEW



REAR VIEW

REASON FOR REPAIR (PLEASE PRINT)	DRYSUIT MAKE/MODEL
	DRYSUIT SIZE:
	DRYSUIT SERIAL NO:

IMPORTANT - BEFORE SENDING YOUR DRYSUIT

PLEASE MAKE SURE A COPY OF THIS FORM IS ENCLOSED TOGETHER WITH AN ORDER NUMBER WITH YOUR DRYSUIT OR EMAIL THE FORM TO: service@safequip.co.uk - FAILURE TO DO SO COULD RESULT IN A DELAY IN PROCESSING THE REPAIR
 PLEASE ENSURE ALL DRYSUITS ARE CLEAN AND DRY BEFORE SENDING - OTHERWISE A CLEANING CHARGE MAY BE APPLIED
 PLEASE NOTE: IF YOU REQUEST A DRYSUIT WATER TEST YOU WILL BE LIABLE FOR ANY COSTS FOR REPAIRS THAT MAY BE REQUIRED TO ENABLE THE DRYSUIT TO BE WATER TESTED, WHETHER OR NOT THE DRYSUIT PASSES OR FAILS.