



To help us offer you the best possible service, please complete this form,	Date:
and email to: sales@tengroup.com.au	

	e centre & address for the toc	ol to be returned to:
Purchase of	rder number	
DELIVER TO	O TEN	
	QLD WORKSHOP 2B/605 ZILLMERE ROAD ZILLMERE QLD 4034 P: 07 3212 8999	WA WORKSHOP 4/15 BAILE ROAD CANNING VALE WA 6155 P: 08 9455 5574
	sales@t	engroup.com.au
Name		
Contact ph	one number	
Email addre	ess	
		e will be sent to this email for approval prior to repair)
CONTENTS O	F GOODS SENT TO TEN FOR REPA	IR SERVICE REQUIRED
Case		Regular service
Tool		Damaged tool
Manufacturer _		Warranty repair
Battery charger		(NOTE: Proof of purchase must be supplied)
		Other
Tool serial r	number	
Brief descripti	ion of tool failure or service required	l:

PLEASE SAVE A COPY OF THIS FORM FOR YOUR RECORDS AND PRINT A COPY TO SEND WITH YOUR TOOL

