


Ship your Faulty iPods to

Digital Warehouse Pty Ltd
Shop 3, 16 Creek St North
Bendigo Vic 3550

Phone **1300 795 280**

Email ipod@digitalw.com.au

DATE ____ / ____ / ____

 Authorised Service Provider	<input type="checkbox"/> Repair Request <input type="checkbox"/> Quote Request
<p>To ensure all repairs can be performed without delay and returned to you as quickly as possible, please complete all the following details and include this form with your faulty iPod when shipping.</p> <p>IMPORTANT: For security and tracking purposes ensure your faulty iPods are sent to our service department via courier or registered mail. <i>(Failure to provide ALL of the information requested could result in delays in getting your ipod unit repaired and back to you! so be sure to print this page, fill in all the information needed and enclose it with your iPod)</i></p>	

Mandatory Field for Warranty Repairs

I have contacted Apple on 133622, performed the iPod troubleshooting steps, (5R's), also outlined on their web page, prior to requesting a warranty repair. I acknowledge that if after testing no fault is found with my iPod there will be a \$30 charge. I understand that the cost of return postage is my responsibility.

Your Contact Details

First name	Surname
Email	Phone

iPod Return Information

How would you like your iPod returned Registered Post Courier Service

(Please note: returning iPod costs will be added to your iPod repair fee)

Return Address

Suburb	State	Postcode
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iPod Details

iPod Model	Serial Number
<input type="checkbox"/> Out of warranty <input type="checkbox"/> In warranty <input type="checkbox"/> Copy of Proof of purchase attached	
<input type="checkbox"/> I would like to be issued with a repair quote before any repairs are performed	

iPod Fault – please be as descriptive as possible

iPod Format Macintosh Windows

Payment Details

<input type="checkbox"/> Credit Card <input type="checkbox"/> Bank Transfer <input type="checkbox"/> Cheque	
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Bankcard	Card No.
Name on Card	Card expiry date
Signature	

Please Note: credit card payments may attract a 2% processing fee.