# SERVICE RETURNS FORM

**COMPLETE THIS FORM AND INCLUDE IT WITH THE RETURNED TIMESPACE PRODUCT. KEEP A NOTE OF THE PRODUCT SERIAL NUMBER AS A REFERENCE.**

**RETURN TO:** **TIMESPACE TECHNOLOGY LTD**
**LAKEVIEW COURT, ERMINE BUSINESS PARK**
**HUNTINGDON, PE29 6UA, ENGLAND**
**FAO: SERVICE DEPT**

## YOUR DETAILS

Name: _____

Email: _____

Telephone: _____

Address: _____

My supplier is: _____ Customer ref: _____
(If required)

Date: _____

## PRODUCT DETAILS

Serial Number: _____ Part No: _____

Fault Description: _____

_____

_____

Is footage required? NO: ☐ YES: ☐
*(cartridge returns)*

If YES, please specify:

Start date: _____
Start time: _____
End date: _____
End time: _____
Other info: _____

## SERVICE RETURN INFORMATION

**ALL SERVICE RETURNS ARE AIMED FOR A 2-3 WEEK TURN AROUND.**
**ENQUIRIES CAN BE MADE VIA EMAIL, INCLUDE PRODUCT S/N AS A REFERENCE - SERVICE@TSPACE.CO.UK**
**TIMESPACE SERVICE RETURN POLICY CAN BE FOUND AT - WWW.TSPACE.CO.UK/SERVICE**

INTERNAL USE: _____