



LineStar Utility Supply Inc.
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Tool Repair Information

Typically, we will contact for approval on repairs that approach 50 - 60 % of the cost to replace the tool.

Date:	
Customer:	
Address:	
Contact Name:	
E-Mail/Phone:	

Manufacturer:	
Model #:	
Serial #:	

Detailed description of the problem, comments and specific instructions:

Purchase Order #:			
Authorized By:			
Method of Payment:	<input type="checkbox"/> On Account,	<input type="checkbox"/> Visa,	<input type="checkbox"/> MasterCard
Name on Card:			
Card Number:	Expiry Date:	3 Digit Code:	
Person to call for Card #:			
Phone #:			
Preferred Return Carrier:			
Account Number:			
Return Address if different:			