



Business Hours: 8:00 am - 4:30 pm
 Monday through Friday
 Ph: 858.748.6948

Service Request Form

Ship Product To:
 Hitec RCD USA, Inc.
 Attn: Customer Service
 9320 Hazard Way Suite D,
 San Diego, CA 92123

1. Customer Information (Please print)

NAME _____

STREET NAME (PO Box not accepted) _____

CITY STATE ZIP CODE _____

PHONE _____

E-MAIL ADDRESS _____

2. Ship To Information (If different from customer info)

NAME _____

BUSINESS NAME (IF APPLICABLE) _____

STREET NAME _____

CITY STATE ZIP CODE _____

CHECK ONE: W/C SHIP

3. Returned Product Information Note: Please be exact when listing product being returned

Model Name(s) or Part Number(s)	Quantity	Model Name(s) or Part Number(s)	Quantity

4. Description of Problem(s) If product has been sent to Hitec for service before, please attach copy of service invoice

5. Purchase Information

PURCHASE DATE (MM/DD/YY) _____ WHERE PURCHASED _____

Be sure to provide a copy of your receipt for all warranty repairs. If one is not provided, product warranty is left to the technicians discretion.

6. Signature: _____ Date: _____

Received By: _____ For office use only

