



RESIDENTIAL COMPUTER SERVICE

564 Joseph Rd. Manteca CA 95336

(209) 824-2550

http://www.rcsofmanteca.com

"Making Your Home PC More User Friendly"

SERVICE REQUEST FORM

Billing Information

If same as contact Information

Name:	
Address:	City: Zip code:
Phone:	Cell phone:
E-mail Address:	

Contact Information

Name:	
Address:	City: Zip code:
Phone:	Cell phone:
E-mail Address:	

Equipment Information:

Manufacture	Model #	Serial #	
Is your equipment under warranty?		Warranty Information:	
Username	Password	2nd Username	2nd Password
Internet Service Provider	Username	Password	

Information About Your Data:

My data has been backed up I do not wish to back up my data Please backup my data (estimated 1hr. labor)

Please describe the problems:

also include any error messages you're receiving. If you need more room you can use the back of this form.

Where would you like your equipment to be serviced at?

On-Site for \$40.00 /hr.

At RCS. We will pickup and deliver for \$10.00 plus In-shop rate of \$30.00 /hr.

At RCS You will drop off your equipment \$30.00 /hr.

Remote Assistance We will connect to your PC \$40.00 /hr.

Authorization:

I authorize up to \$_____ in labor and parts (call me before work exceeds this amount)

Please call me after diagnostics is completed (No authorization above estimate cost of \$30.00)

I hereby authorize Residential Computer Service to repair my equipment. I understand that (1) I assume all risk of loss of data from any and all causes or in any way related to or resulting from the sales, repair or service of products by RCS. (2) The cost of repair is labor, parts and any shipping. (3) I understand there is an estimate and diagnostic fee of \$30.00 per unit (4) Without notice any equipment not claimed within 30 days becomes property of Residential Computer Service. (5) Delinquent invoices will be assessed a \$15 late charge if payment is not received within 10 days of the invoice date. If an invoice remains delinquent 30 days after its due date, an additional \$10 per month will be assessed for each month of delinquency. NOTICE TO CONSUMER: PLEASE READ IMPORTANT INFORMATION ON BACK

X

X

Authorized Signature

Date

Customer called with estimate for \$_____	Approved to proceed with repair on:_____	Time:_____	Warranty Repair?_____
Beginning Mileage:_____	Ending Mileage_____	Total Mileage_____	
Pick-up date:_____	Return date:_____	Time Arrived:_____	Time Left:_____
Total Time on-Site or worked?_____			

FOR RCS USE ONLY