

New England Imaging Distribution
 Technical Service
 741 Main St.
 Claremont, NH 03743
 603-504-6317



Repair and Service Form

Sender:

First and last name: _____ Date: _____

Street Address: _____

City: _____

State, Zip Code: _____

Tel. No.: _____ Signature: _____

Email: _____

Device type:

- | | | | |
|-------------------------------------|-------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Di600 | <input type="checkbox"/> Di700/700A | <input type="checkbox"/> i40 | <input type="checkbox"/> Air 1C/Air R |
| <input type="checkbox"/> Di866MK II | <input type="checkbox"/> Di622 | <input type="checkbox"/> MG8000 | <input type="checkbox"/> I60A |
| <input type="checkbox"/> Di466 | <input type="checkbox"/> MF18 | <input type="checkbox"/> Battery pack | <input type="checkbox"/> Other |

Camera used with: _____ Nissin Serial No: _____

- Enclosed is: proof of purchase / if applicable, copy of product-registration email
- Date of purchase:
- Please supply a repair cost estimate
- Please repair if costs do not exceed _____

Description of problem: To enable an accurate and timely cost estimate, please supply a precise description.

<p>Physical damage:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Broken shoe <input type="checkbox"/> Broken head <input type="checkbox"/> Cracked screen <input type="checkbox"/> Broken battery door 	<p>Flash won't:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fire <input type="checkbox"/> Sync <input type="checkbox"/> Power on <input type="checkbox"/> Zoom <input type="checkbox"/> Fire sub flash <input type="checkbox"/> Expose properly
<p>Battery won't:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Charge <input type="checkbox"/> Stay charged <input type="checkbox"/> Turn on <input type="checkbox"/> Other 	<p><input type="checkbox"/> Other issues</p>