



PowerFloat Inc.

112, 7865 – 56th Street SE
Calgary, Alberta. T2C 5S7
1-877-969-2233 Toll Free
403-984-7702 fax

info@powerfloat.net email / www.powerfloat.net

USA PowerFloat REPAIR PROCEDURES

Authorized repair facility:

PowerFloat Inc.
10585 Quarter Horse Lane
Melba, ID
83641

Repair Tech: Terry Logan
Repair Facility: Cell Phone: 208-870-3991

1. Ship to facility above.
2. Ship the PowerFloat in a suitable protective box or case. Remove all accessories and equipment that do not require inspection or repair in the package. **Each PowerFloat drill or attachment in the package will be evaluated and subject to an evaluation charge as listed below unless otherwise specified.** Remove all batteries from the cordless units unless it is a 14Volt or 18Volt drill in which case, please include one battery in the package. Ensure the battery is detached from the drill. PowerFloat will not be responsible for damaged cases due to shipping.
3. Complete the **Repair Authorization Form**.
 - Email to: info@powerfloat.net or fax (403) 984-7702.
 - Include one copy in the case with your PowerFloat.
 - Retain one copy for your records.
4. Complete two (2) **Shipping Document Labels**
 - One addressed to the repair facility – see address above
 - One addressed to your clinic (to be used for return shipping from PowerFloat Inc.)
5. Customers are responsible for all shipping costs. Fed Ex Express is recommended for rush repairs. Please retain copies of all tracking numbers for your records.
6. You will be contacted with a quote prior to all repairs being completed. PowerFloats will be returned to you upon receipt of payment.

***Note: There will be a \$200.00 evaluation charge on any PowerFloats evaluated but not approved for repair.**

Please direct all questions or concerns regarding the repairs to Terry Logan at 208-870-3991.

USA

PowerFloat – REPAIR AUTHORIZATION



CUSTOMER INFORMATION

Ship Date: _____

Clinic Name: _____

Address: _____

Repair Contact Name: _____ Phone Number: _____

Payment Contact Name: _____ Phone Number: _____

Email: _____

PowerFloat REPAIR INFORMATION

Select model:

Drill #

Right Angle Shaft #

- | | | |
|---|-----------|-----------|
| <input type="checkbox"/> Plug In – Quick Connect | SN: _____ | SN: _____ |
| <input type="checkbox"/> Cordless 20V - Quick Connect | SN: _____ | SN: _____ |
| <input type="checkbox"/> UltraLite– Quick Connect | SN: _____ | SN: _____ |
| <input type="checkbox"/> Plug In – Not Quick Connect | SN: _____ | SN: _____ |
| <input type="checkbox"/> Other _____ | SN: _____ | SN: _____ |

Was this item repaired within the last six months?

☐ Yes

☐ No

☐ Unsure

Please explain problem:

SHIPPING INFORMATION

Shipping Prepaid: Yes ☐ (fill out below)

No: ☐ (Please invoice us for shipping charges):

Shipping Waybill Number to **PowerFloat Inc.**: _____

Return Shipping Waybill Number: _____

FOR OFFICE USE ONLY:

Grinding Wheel: Diamond ☐ Solid ☐ TCC ☐

Date Inspected: _____ Date Repaired: _____

Service Report Findings:
