



PowerFloat Inc.

112, 7865 – 56th Street SE

Calgary, AB T2C 5S7

1-877-969-2233 Toll Free

info@powerfloat.net / www.powerfloat.net

USA

PowerLite REPAIR PROCEDURES

In the event that your PowerLite is damaged or is not operating properly you will need to send it in to PowerFloat for repair at:

PowerFloat Inc.
112, 7865 – 56th Street SE
Calgary, Alberta T2C 5S7
1-877-969-2233

Note: Replacement parts for PowerLite II or III (versions that use standard AA batteries) are limited. Please email photos of the light to info@powerfloat.net and the issue prior to shipping to determine if it is repairable.

1. Please package your PowerLite with bubble wrap in a box to protect against any damages during shipping. Do **NOT** include batteries or charger. Lithium batteries are considered dangerous goods and require additional documentation for shipping due to potential hazards during transport.

Please note: PowerFloat will not be responsible for damages due to shipping.

2. Complete the **Return Authorization Form** and make two (2) copies.
 - Email to: info@powerfloat.net or fax to 403-984-7702
 - Include one copy in the box with your PowerLite
 - Retain one copy for your records
3. Fill in the highlighted areas of the **Commercial Invoice** we provide and attach to the outside of the box. This form documents that the product is being sent to Canada for repair and then will be returned back to the US.
4. Customers are responsible for all shipping costs. Please retain copies of all tracking numbers for your records. Please ship your PowerLite by **UPS*** courier if possible. If you do not have an account with a courier company, please notify the PowerFloat office and we will make arrangements for your return shipping.
***Shipments sent via FedEx or other courier services will likely be subject to a customs and duties fee that will be added to the repair invoice.**
**** If you ship via the US postal service make sure you get a tracking number.**
5. A quote of repair costs will be provided prior to all repairs being completed.
6. Please direct any questions or concerns regarding the repairs to the PowerFloat office at 1-877-969-2233.

USA



POWERLITE REPAIR AUTHORIZATION

Please complete:

- **SCAN and email a copy of this form to: info@powerfloat.net**
- Forward one (1) copy in the box with your PowerLite to PowerFloat.

CUSTOMER INFORMATION

Ship Date: _____

Clinic Name: _____

Doctor's Name: _____

Address: _____

Phone Number: _____

Fax: _____

Email: _____

POWERLITE REPAIR INFORMATION

Please explain problem:

Is this a possible Warranty Repair?

☐ Yes

☐ No

***If YES please indicate the date of purchase:** _____

(PowerLites may qualify for warranty if within 6 months of purchase date)

SHIPPING INFORMATION

Shipments sent via FedEx or other courier services will likely be subject to a customs and duties fee that will be added to the repair invoice.

Courier: _____

Shipping Waybill Number to PowerFloat: _____

Return Shipping Waybill Number if included: _____

Commercial Invoice

SELLER/SHIPPER (Name, Full Address, Country)		Invoice Date and Number		Customer Order Number	
		Tracking ID/Air Waybill No.			
Tax Identification Number (EIN)		Buyer (if Other than Consignee)			
CONSIGNEE (Name, Full Address, Country) PowerFloat Inc. 112, 7865 -56th Street SE Calgary, Alberta T2C 5S7					
Port of Lading		Terms and Conditions of Delivery and Payment (incoterms)			
Final Destination Calgary, Alberta	Exporting Carrier				
Other Transportation Information		Currency of Sale USD			
Marks and Numbers	Total Number of Packages 1	Total Gross Weight (kg) 2.2 Kg		Cubic Meters	
Complete And Accurate Commodity Description And Country of Manufacture		Quantity/ Unit of Measure	Unit Price		Amount
POWERLITE FOR USE IN EQUINE DENTISTRY. COUNTRY OF MANUFACTURE: CANADA RETURNING FOR REPAIR. Code: 9018.90.80.00		1			\$50.00
These commodities, technology, or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to United States law is prohibited. I declare all the information contained in this invoice to be true and correct. * Signature and Status of Authorized PersonDatePlace		Packing Costs			
		Freight Costs			
		Other Transportation Costs			
		Handling			
		Insurance Costs			
		Assists			
		Additional Fees			
		Duties and Taxes			
		Total Invoice Value			
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