

Saltillo Repair Number Request Form

Device Serial Number and problem:	
Your First and Last Name:	
Your Email Address:	
Your Phone Number:	
End User First and Last Name:	<input type="checkbox"/> Same as Above
End User Address:	
End User City:	
End User State:	
End User Zip Code:	
Where will the repaired device be shipped back to:	<input type="checkbox"/> Same as End User
Facility Name (If applicable):	
Name (Attention To):	
Address:	
City:	
State:	
Zip Code	
Phone Number:	
Email Address:	
Non-warranty Bill To Information	<input type="checkbox"/> Same as End User <input type="checkbox"/> Same as Ship To
Facility Name (If applicable):	
First and Last Name:	
Address:	
City:	
State:	
Zip Code:	
Phone Number:	
Email Address:	
Is a Service Loan Device needed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Person financially responsible for the Service Loan Device:	<input type="checkbox"/> Same as End User <input type="checkbox"/> Same as Ship To <input type="checkbox"/> Same as Bill To
Name and Email if not above:	
Is a charger needed with Loan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Loan Device Ship To:	<input type="checkbox"/> Same as End User <input type="checkbox"/> Same as Ship To <input type="checkbox"/> Same as Bill To
Facility Name (If applicable):	
First and Last Name:	
Address:	
City:	
State:	
Zip:	
Phone Number:	
Email Address:	

Salttilo Repair Number Request Form

Please email the completed form back to the technician you received it from or email it to Service@salttilo.com. Upon receipt, we will send you a CA (return) number for the repair. Once you receive the CA number then ship only the device to repair (and the charger if asked by the technician) and no accessories to:

Salttilo Service Dept.
Attention: (CA number)
1022 Heyl Rd
Wooster, OH 44691