



PRE-SERVICE CHECK-IN SHEET

JOB NO. _____

Client's Information

Company Name: _____ Phone No: _____

Name: _____ Phone No: _____

Return Shipping Address: _____

City: _____ Prov: _____ Postal Code: _____

Email: _____

How did you hear from us: Website__ Google__ eBay__ Amazon__ Referred By _____

Instrument Cluster Information

Year _____ Make _____ Model _____

VIN No./ Serial No. _____

Briefly explain the problems presented with the instrument cluster:

Other Service Request. (Ex. Different LED light, Gauge overlay/Faceplate etc.)

Dashboard Instrument Cluster is not responsible for any damages done to the instrument cluster during shipping process. Please be advised that every product is photographed/recorded upon arrival and return shipping.

Kindly note that there is up to \$150 check and diagnose fee which would be waived if the customer proceeds with the repair(s). The customer agrees to pay \$150 should he/she decide to discontinue with the repair(s) for any reason whatsoever after we check and diagnose the cluster.

Please be aware that Dashboard Instrument cluster will go ahead and do the repair if the price is below \$1500 without asking approval of the customer.

I authorize Dashboard Instrument Cluster to repair my Instrument Cluster for the above-mentioned problems.

DATE: _____ SIGN: _____