

STANDARD HEARING AID AND WIRELESS ACCESSORY REPAIR FORM

GO PAPERLESS USING eSTORE – OUR ONLINE ORDERING SYSTEM

STEP 1 - ORDER PLEASE FILL OUT FORM ACCURATELY, LEGIBLY AND COMPLETELY IN ORDER TO ENSURE THERE ARE NO DELAYS WITH YOUR ORDER.

BILL TO: ACCOUNT NUMBER: _____
ADDRESS: _____

SHIP TO: ACCOUNT NUMBER: _____
ADDRESS: _____

CONTACT: PHONE: _____
EMAIL: _____

CONTACT: PHONE: _____
EMAIL: _____

SERVICE OPTIONS (CHARGES ARE PER HEARING DEVICE)

SAME-DAY SERVICE \$54.49 ONE-DAY SERVICE \$32.69

P.O. NO. DATE

STATE/SPECIAL PROGRAM BENEFIT STATE

SERVICE PLAN

6 MONTHS (DEFAULT) 12 MONTHS

HEARING AID	\$150.00	\$180.00
AUDIBEL HEARING AID GREATER THAN 5 YEARS	\$192.00	\$220.00
STARLINK/STARKEY ACCESSORIES	\$76.28	\$98.08

ADDITIONAL OPTIONS

STANDARD PRODUCT RECASE: \$32.69

STEP 2 - DEVICE INFORMATION

FIRST NAME _____

LAST NAME _____

COMPLETE SECTION BELOW IF REPLACEMENT IS REQUIRED

SERIAL NUMBER (INCLUDE MAKE & MODEL IF NOT AN AUDIBEL DEVICE)

LEFT _____

RECEIVER GAIN CABLE LENGTH OR RECEIVER SERIAL NO. (CUSTOM CASED/AP)

IMPRESSION ENCLOSED USE SCAN ON FILE

SERIAL NUMBER (INCLUDE MAKE & MODEL IF NOT A STARKEY DEVICE)

RIGHT _____

RECEIVER GAIN CABLE LENGTH OR RECEIVER SERIAL NO. (CUSTOM CASED/AP)

IMPRESSION ENCLOSED USE SCAN ON FILE

ADDITIONAL SERIAL NO. # (CHARGER/ACCESSORY) _____

NOTE: Fit-Related Issues Require New Impressions

STEP 3 - PRODUCT

STANDARD PRODUCTS AND ACCESSORY/CHARGER - REPAIR (CHECK ALL THAT APPLY)

- | | |
|---|---|
| <input type="radio"/> DEAD | <input type="radio"/> WEAK |
| <input type="radio"/> FADES | <input type="radio"/> DAMAGED |
| <input type="radio"/> DISTORTED | <input type="radio"/> INTERMITTENT |
| <input type="radio"/> EXCESSIVE BATTERY DRAIN | <input type="radio"/> WILL NOT READ |
| <input type="radio"/> FEEDBACK | <input type="radio"/> NOISY |
| <input type="radio"/> STATIC | <input type="radio"/> INTERMITTENT CONNECTIVITY/STREAMING |
| <input type="radio"/> RIC CUSTOM CASED/AP RECEIVER CABLE LENGTH | |

WAS MEDICAL INTERVENTION NEEDED FOR THE SYMPTOM REPORTED?

YES NO

WARRANTY DATE: _____

WARRANTY DATE WILL BE VERIFIED UPON RECEIPT, CHARGES WILL APPLY IF OUT OF WARRANTY. ADDITIONAL CHARGES MAY APPLY TO ITEMS LISTED ABOVE, DEPENDING ON REPAIR ACTIONS NEEDED. PRICES SUBJECT TO CHANGE. INTERNATIONAL PRICES MAY DIFFER.

USER INFORMATION

DO YOU HAVE THE SOFTWARE TO PROGRAM HEARING AIDS?

YES (NO ACTION NEEDED) NO (PLEASE PROVIDE AUDIOGRAM INFORMATION BELOW)

LEFT MCL: _____ UCL: _____ 500 kHz: _____ 1 kHz: _____
2 kHz: _____ 3 kHz: _____ 4 kHz: _____
RIGHT MCL: _____ UCL: _____ 500 kHz: _____ 1 kHz: _____
2 kHz: _____ 3 kHz: _____ 4 kHz: _____

SPECIAL INSTRUCTIONS:

REFERENCE #



DO NOT WRITE HERE
FACTORY USE ONLY