



LOANER REQUEST FORM

LOANER TYPE: DEMO REPAIR [Serial Number of your Equipment: _____]
 (e.g. "AP1090")

Name: _____ Title: _____
 Company: _____
 Shipping Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 Mobile: _____ Email: _____
 Item(s) Requested: _____
 Requested Arrival Date: _____ Shipping Carrier: _____
 Overnight 2-day Air 3-day Express Ground
 Shipping Account #: (optional) _____
 Apply shipping charges to Credit Card below *(required if no account is provided)*

A valid Credit Card number must be provided for liability purposes - no charges are applied (except applicable shipping cost); but card info will be held on file for the duration of the loan in the event that the loaner equipment is lost, damaged or not returned to Comrex Corporation in accordance with this agreement.

Mastercard Visa AMEX
 Cardholder's Name: _____ *(as it appears on the card)*
 Card #: _____ - _____ - _____ - _____ Exp. Date: ____ / ____
 Card ID#: _____ *(3-digit "CID code" on back of card; or 4-digit code on front of AMEX)*
 Bank Card issued by: _____ 800# on back of card: _____
 Cardholder's Signature: _____ Date: _____

Use of loaner equipment is free of charge; however, the customer is responsible to cover the full cost of inbound and outbound shipping charges. If this is a **DEMO** loaner, Equipment must be returned to Comrex within 14 days following receipt of the unit. **REPAIR** loaners are expected back within 1 week following receipt of repaired unit. After such times, customer may be liable for rental fees at the rate of \$300 per week.

The equipment remains the property of Comrex Corporation. Customer agrees to return equipment by insured carrier, at the customer's expense, by the designated return date. Customer is liable for the full replacement value of the loaner equipment unless returned as outlined above. Customers returning loaner equipment to Comrex with excessive damage (deep scratches, bent metal, broken components, etc.) or in non-working condition will be charged for any necessary repairs.

Please Email completed form to: info@comrex.com /OR/ Fax to: 978-784-1717
If you do not receive an email confirmation
please contact us at 978-784-1776