



# ARCONIC TOOL SUPPLY LLC WORK ORDER FORM

## Arconic Tool Repair

Bay Fastening Systems

30 Banfi Plaza North

Farmingdale, NY 11735

Ph: 516-294-4100 Fax: 516-294-3448

Date Sent

Purchase Order, Tag, or Reference number for repair

Company Name

Contact Name

Address

Phone

City, State, Zip

Fax

Description of Tool Sent - Part # and Serial #, Manufacturer - i.e... Marson, Recoil etc..)

Type and size of rivet or insert being installed - please include 15-25 samples

**PLEASE CHECK ONE:**

Warranty Repair  Copy of invoice must be included and must be within 90 days of end user original purchase for warranty.

Non Warranty  Estimate - a \$50.00 fee will apply for all estimates. This charge will apply toward cost of repair and fee applies to air tools only. If the estimate is denied, a \$50.00 fee will be billed to customer returning tool.

Repair  Repair - no estimate needed, proceed with repair.

Buyback Program  Keep my old tool and send a new one at a discounted price. Call for details.

Reason for repair (brief description of the tool malfunction) and include sample of rivets being installed.

**Please note:**

-Arconic reserves the right to refuse repair of any tool.

-For safety and liability reasons, non-repairable tools will not be reassembled upon return.

-Customer is responsible for return freight to repair center. If diagnosis was found to be a warranty issue, the repair will be returned to the customer at no charge.

-Returning this work order denotes acceptance of Arconic's Terms.

