

## **Pager Replacement Form**

Date:	-

## Instructions

- 1. Please complete and sign the form below including your information, the pager numbers you want to replace, and identify your system.
- 2. Fax the form to JTECH at 770-682-3459 or email it to wecare@jtech.com
- 3. Call 800-321-6221 or email <a href="wecare@jtech.com">wecare@jtech.com</a> to confirm receipt of the fax.

Con	npany I	Name																		
Add	ress																			
City								State							Zip Code					
Pho	ne									Fa	K									
Con	tact									Em	ail			_						
System Type: ☐ Server Paging ☐ Guest Pag Please X out the pager numbers to replace.						ing   Other								Sales tax & Shipping will be added to every order.						
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	
41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	
81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	
Cred	ment hod: dit Card			Terms (	(must b		oved) Exp. Da	te:	□ C	redit Ca	ard			ID Cod	e:					
Sigr	ature o	of Card	Hold H	lolder:								Printed	l Name	):						
				hod – se sele	ct to a		Expe	dited			ired (c	heck o -			ed shi	pping	is ava	ilable	for an	
		R ORD ABOV		S GON	E THR	OUGH	OUR S	STAND	ARD P	RODU	CTION	TIME I	T WILL	. BE SI	HIPPE	VIA T	HE ME	THOD		
•	available Terms o Limited MATERI RECOM WILL BI ACCOR SUCH E RESPOI OR IMI MERCH	responsible at addition all involversent Mercent (A) RI DANCE (QUIPME NSIBILITY PROPER ANTABILD) VERED	ional cost ices are p y: JTECI D WORKI THE USE EPAIR O WITH JTE INT. REP Y TO REI LITY AND BY THE	ore pay or H WARF MANSHIF E OF A S R REPL ECH'S R LACEME PAIR OR RICAL O FITNES	credit ca CANTS (1)  UNDEFURGE PI ACEMEN ETURN FONT MAY REPLACE CONNECTOR OF THE CONNECTOR OF THE CONNE	ATT UNIESS LIMITED NORMA ROTECT TOF T PROCED BE WITH CE, BATT CTION. A PARTIC	s otherwise WARRAL USE FOR WITH HE EQU URES OF H REFUR ERIES, ( ANY INCOULAR F	SE SPECIFI SOR A PI FOR A PI H ALL EC JIPMENT R (B) AT RBISHED DR ANY I PLIED PURPOSE ADE, IF A	ed. THAT RI ERIOD C QUIPMEN NOT M JTECH'S EQUIPM EQUIPMI WARRAI E, ARE L AVAILAB	EPAIRED F THIRT IT. JTECI MEETING S SOLE ( MENT. TH ENT DAM NTIES ( IMITED I LE, AT J	OR REY (30) DOWN TECH (30) DOWN THE NOTECH (30) DOWN THE NOTECH'S	EPLACEN AYS FOR IRE LIAB IS LIMIT AND DIS ED WAF BY ACCIE E EQUIF ITION TO PRICES	MENT ECREPAII ILITY AN ED WAF CRETION RANTY DENT, AE PMENT, THE W THEN IN	QUIPMEI RED EQI D CUST RRANTY N, REFU DOES N BUSE, MI INCLUD	S otherwise  NT WILL  UIPMENTO  OMER'S  AND W  ND OF TO  OOT INCLI  SUSE, W  DING TH  TY PERIC  T. THE L	BE FR ("WARF SOLE AI HICH CI HE PRIC JDE, AN /ATER D IE IMPL DD. REF	EE FRO RANTY F ND EXCL JSTOME E CUSTO D JTECH AMAGE, LIED WA	M DEFE PERIOD") LUSIVE F R RETU OMER P H WILL H POWER ARRANT REPLAC	ECTS IN  . JTECH REMEDY JRNS IN AID FOR IAVE NO . SURGE IES OF CEMENT	

By signing below, I acknowledge and agree to the terms and conditions of this Order Form and represent and Warrant that I am authorized to enter into this agreement.

Customer Signature:	Printed Name:	Date: