

M.S. Design Initial Service Setup

Phone #815.325.4544 • Fax #707.924.2429

Date: _____

Time: _____

Received By: _____



Customer Information:

Name:	Phone Number:
Address:	City, State:

System Information:

Operating System:

Microsoft Windows CD: Yes No

Please save all your important documents, pictures or anything else that you want to keep to a folder on your desktop Call **KEEP**. If you need help with this step please call us. **Otherwise it will be deleted!!!**

Saved Data to Desktop Folder: Yes No

System Problems:

Software:

List any software that needs to be reinstalled (printer drivers, applications, application version #, etc.) Please provide copies of requisite software.

Signature:

M.S. Design reserves the right to FORMAT the hard drive to repair and is not liable for ANY lost data during the repair. Customer should backup their Documents, Music, Picture Files, Settings, and any other important files to disk BEFORE the repair is started. I have agreed that all the above information is true and correct. I also agree to have the Technicians at M.S. Design evaluate and repair the above listed item(s). I understand I am and will be charged a Minimum \$50.00 Bench Fee if the repair work is deemed NOT COVERED UNDER CONTRACT. Any equipment not picked up within 30 days of repair date will be disposed of by M.S. Design. Customers' signature agrees to the terms and conditions. The customer assumes all responsibility for licensing any software installed by M.S. Design as part of the repair process.

SIGNED: _____

M.S. Design Staff Below:

Technician:	Date/Time of Completion:
Cost of Repair:	Contract Work: Yes _____ No _____
Work Completed:	