



# W&H Premium Service Request Form U.S.A

We want to provide you with the best possible repair service - period.

1. Fill out this form completely - use a valid/accessible email address!  
TAX ID# is a legal requirement for shipping medical devices.
2. Pack your equipment securely.  
(W&H Impex Inc. will not take responsibility for transportation damages)
3. Indicate your preferred method of payment and your return shipping selection from our W&H Service Department.
4. After evaluation, our W&H Service Team will provide a detailed written estimate by email ONLY.
5. Unanswered estimates will be returned unrepared after 1 month at your expense.

If you need more details, please look us up on [www.wh.com/na](http://www.wh.com/na)

**Ship to - W&H Impex Inc.**  
**33091 W Jefferson Ave**  
**Brownstown, MI 48173, USA**  
**+1 800 265 6277**

Your Name .....

Address .....

City .....

State ..... Zip Code .....

Phone .....

e-mail .....@.....

Contact person .....

TAX ID# .....

PLEASE NOTE: The TAX ID# is a legal requirement for business tax verification purpose only and will be protected by law - strictly confidential.

Purchase date & Dealer .....

Preferred Payment Option      Shipping Options from W&H to you







Ground - Free of charge



2 Day Express - charged

Priority Overnight - charged

Please list individual components:

equipment type	qty	model no. / serial number	comments / information / service request / billing instructions
handpiece(s) 			
console 			
motor with cable 			
foot pedal 			
other W&H / OEM equipment			

**W&H Impex Inc.**  
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 Brownstown, MI 48173, U.S.A.  
 t +1 519 944 6739  
 f +1 519 974 6121  
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Any goods submitted to W&H Impex Inc. for repair shall be sent to W&H Impex Inc. and returned by us, are at the risk and cost of the Customer.

