

Date: \_\_\_\_\_

## MOVADO TIMEPIECE SERVICE REQUEST

In order to properly enter the correct information in our system, please print clearly.

### Customer Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

### Shipping Information (if different from Customer Information)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

### Please Circle Information:

Warranty receipt enclosed: **Yes No**

Is there any part of the timepiece you would not want replaced? **Yes No**

If yes, what part: \_\_\_\_\_

### Description of Service Requested (please check all that apply):

#### Replace:

#### Service:

#### Miscellaneous:

- |  |                                |  |
|--|--------------------------------|--|
| <input type="checkbox"/> Battery Service | <input type="checkbox"/> Clasp | <input type="checkbox"/> Adjust Automatic Timing |
| <input type="checkbox"/> Strap           | <input type="checkbox"/> Stem  | <input type="checkbox"/> Stops and Starts        |
| <input type="checkbox"/> Bracelet        | <input type="checkbox"/> Hands | <input type="checkbox"/> Date Will Not Change    |
| <input type="checkbox"/> Glass/Crystal   | <input type="checkbox"/> Light | <input type="checkbox"/> Digital Does Not Work   |
| <input type="checkbox"/> Case            | <input type="checkbox"/> Alarm | <input type="checkbox"/> Moisture Under Glass    |
| <input type="checkbox"/> Other: _____    |                                |  |

If the timepiece is not under warranty, we will need a credit card and authorization to process the service. A return shipping fee of \$35 is required for insurance and signature required via UPS or Fed Ex. Declined orders will incur shipping charges.

Once watch is received, it will take approximately one week for our team to contact you regarding your repair. **DO NOT SEND ORIGINAL WATCH BOX AS IT WILL NOT BE RETURNED;** Matheu's will not be responsible for its return.

### Shipping Instructions (ship to address below):

- 1) Ship Insured.
- 2) Use traceable shipping method (UPS, FedEx Ground, USPS Certified, Registered, Confirmation, Insured)
- 3) PLEASE DO NOT SEND WATCH IN THE GIFT BOX.

Authorized to proceed with service up to \$ \_\_\_\_\_ (no estimate needed)

Please Provide Estimate: **Yes No**

Credit Card Authorization: Please circle one: **VISA / MasterCard / Discover**

Credit Card Number: \_\_\_\_\_ Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

**Note:** Pricing and payment methods outlined pertain to our Service Center in Highlands Ranch only.

Would you like to receive information/offers from Matheu's Fine Watches and Jewelry? **Yes No**

### Shipping Address: Matheu's Fine Watches & Jewelry

Matheu's Fine Watches & Jewelry  
Highlands Ranch Town Center  
9315 Dorchester St., Suite 106  
Highlands Ranch, CO 80129