

SERVICE REQUEST FORM

Please fill out this form and include it with the merchandise in a secure mailing box, making sure the merchandise is securely protected. Ship via U.S. Postal Service or any transit service, **being sure to insure the merchandise to your satisfaction.**

For repairs under Warranty, please include a copy of your Chopard Certificate or a copy of your bill of sale from an authorized Chopard retailer.

CUSTOMER INFORMATION:				
First Name:	Last Name:			
Address:			State	
Email:	Phone number (business hours):			
MERCHANDISE BEING SERVICED:				
□ Watch □ Jewelry	Cufflinks	☐ Writing In	strument Clock	Sunglasses
Reference:	Reference:		-	
Serial	Description			
Please describe your servicing request:				
PLEASE NOTE: Any addition box will not be returned. Ex		d Box, Sung		
Upon receipt, Chopard U.S.A. will notify you will receive a repair estimate. Please note Email is the most expeditious manner of our customers. May we send the correspondent	that all vintage notification and	and complicati the preferred	ons take longer to es communication meth	stimate and repair. nod by most of
			Cut bellow to use	as Mailing Label
	CUSA	A		
75.17	.			

75 Valencia Ave, Suite 900 Coral Gables, FL 33134 305-774-3898