



# EQUIPMENT RETURN FORM

## INSTRUCTIONS

1. The information to complete this form may be found on your most recent BEC Fiber bill.
2. Please complete all blanks. If handwritten, please print legibly.
3. Return this form with your BEC Fiber equipment.

\_\_\_\_\_

BEC FIBER ACCOUNT NUMBER EQUIPMENT ID # (on Modem/Router sticker)

\_\_\_\_\_

CUSTOMER NAME (as it appears on account)

\_\_\_\_\_

CUSTOMER'S PRIMARY E-MAIL ADDRESS OTHER E-MAIL ACCOUNT OTHER E-MAIL ACCOUNT

\_\_\_\_\_

PHYSICAL ADDRESS – STREET # AND NAME

\_\_\_\_\_

CITY STATE ZIP

\_\_\_\_\_

FORWARDING MAILING ADDRESS – STREET # AND NAME

\_\_\_\_\_

STATE ZIP

### PLEASE INDICATE ALL ITEMS RETURNED:

MODEM  AC ADAPTER  USB CABLE  ETHERNET CABLE  WI-FI EXTENDER: QTY \_\_\_\_\_

### IF BEC FIBER HAS QUESTIONS, PLEASE INDICATE PREFERRED METHOD OF CONTACT (PLEASE CHECK ONE):

PLEASE CONTACT ME BY E-MAIL \_\_\_\_\_  
CUSTOMER'S E-MAIL ADDRESS

PLEASE CONTACT ME BY PHONE \_\_\_\_\_  
CUSTOMER'S PHONE NUMBER

I certify that all of the above equipment is present and in good working condition at the time of shipping or drop off. I understand that my refund is dependent on correctly filling out this form and on the modem being in good working condition. I understand that I am responsible for any/all shipping costs and that I am responsible for loss, theft, or damage to the modem during shipping.

\_\_\_\_\_

AUTHORIZED CUSTOMER SIGNATURE DATE

### PLEASE RETURN ALL EQUIPMENT TO A BEC OFFICE OR SHIP THE MODEM AND A COPY OF THIS FORM TO:

Bandera Electric Cooperative  
 ATTN: BEC Fiber  
 PO Box 667  
 Bandera, TX 78003

**NOTE: ALL ITEMS MUST BE SHIPPED WITH A TRACKING #.**

**Bandera Office**  
 3172 State Hwy 16 N  
 Bandera, TX 78003

**Boerne Office**  
 2 Spencer Rd. Suite #103  
 Boerne, TX 78006

**Comfort Office**  
 739 Front St.  
 Comfort, TX 78013

<b>COMMENTS</b>	REASON FOR EQUIPMENT RETURN: _____
	_____
<b>INTERNAL USE</b>	_____