

# harddisk-recovery.com

## Orderform

Please fax this form to **Harddiskrecovery.nl: 08002303030** or **+31(0)20 866 48 17**.

Please put the original with the disks that you send to:

**Harddiskrecovery.com, Delftechpark 26, 2612 XH Delft, the Netherlands.**

### Contact info

**Contact:**

**Company & department:**

**Telnr:**

**bij spoed:**

**Return adres:** street / nr:

**postcode/city:**

**Invoicing adres:** street / nr:

**postcode/city:**

**country**

### Disk info

**Brand:**

**Capacity:**

**Mb/Gb**

**Operating system:**

**Required recovery:**  all data  just specified files

**Estimated amount of data to be recovered**

**Mb/Gb**

**File & directory names:**

*if necessary continue on a separate page*

**Data return:**  on CDROM  other, please specify:

**Extra urgency in or outside office hours:**  yes  no

**By signing this form, you authorize harddiskrecovery.nl to recover your data and you agree with the terms and conditions of harddiskrecovery.nl as you have recieved along with this form.**

**City:**

**Date:**

**Signature of lawful representative:**

**Name in print:**

**Note: prevent further damage and pack your disk carefully refer to the information form for the packing tips.**

