



RFID STICKER AND CARD REPLACEMENT FORM

Date of Request : _____ Account No. : _____
 Account Name : _____ Contact No. : _____

Replacement Type

RFID Card RFID Sticker

Card Details			Sticker Details		
Plate No	Existing	New	Plate No	Existing	New
1.			1.		
2.			2.		
3.			3.		
4.			4.		
5.			5.		

Please state reason/s for replacement:

Damage Lost Defective Intermittent Reading Customer Initiated
 Others (Pls. specify): _____

Reason/ Remarks / Instruction :

 Subscriber's Signature over Printed Name

To be filled out by Autosweep RFID Customer Service Representative

AR/ OR No: : _____ Processed by : _____
 Amount Paid : _____ Approved by : _____
 Station / Location : _____ Ref. No : _____



RFID STICKER AND CARD REPLACEMENT FORM

Date of Request : _____ Account No. : _____
 Account Name : _____ Contact No. : _____

Replacement Type

RFID Card RFID Sticker

Card Details			Sticker Details		
Plate No	Existing	New	Plate No	Existing	New
1.			1.		
2.			2.		
3.			3.		
4.			4.		
5.			5.		

Please state reason/s for replacement:

Damage Lost Defective Intermittent Reading Customer Initiated
 Others (Pls. specify): _____

Reason/ Remarks / Instruction :

 Subscriber's Signature over Printed Name

To be filled out by Autosweep RFID Customer Service Representative

AR/ OR No: : _____ Processed by : _____
 Amount Paid : _____ Approved by : _____
 Station / Location : _____ Ref. No : _____