

EBCM Return Form

For our convenience, please fill out this return form with your return address and include with your EBCM package.

Please Check if your module is experiencing the "Pump On" problem..... (GM/TRUCKS & SUVs Only)

Your Return Shipping Info:

Name: _____

Company _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone Number _____ EMAIL _____

Vehicle Information

Year _____ Make _____ Model _____

Additional Information

Trouble Codes _____

Comments _____

Please send your module to:

ABSFixer
Attn: ABS Repair
2268 Yearly Rd.
Nixa, MO 65714

Dont forget to send payment for your repair to avoid delays in service!