



Data Recovery Submission Form

P.O. Box 27475
Lansing, MI 48909
T 517.281.6221

fmds.spl1@forensic-mind.com
www.forensic-mind.com

Attention: To submit a corrupted or damaged hard drive/removable media for data recovery via mail, follow the steps below:

1. Print out this form.
2. Fill out this form completely. Incomplete forms will result in delays to your data recovery
3. Enclose this completed form, your media, the diagnostic fee (can be applied towards data recovery cost) and ship to our address.

FMDS currently only accepts US Postal Service Shipments. Please ship with USPS to assure that your data is recovered quickly. We also recommend you insure your shipment.

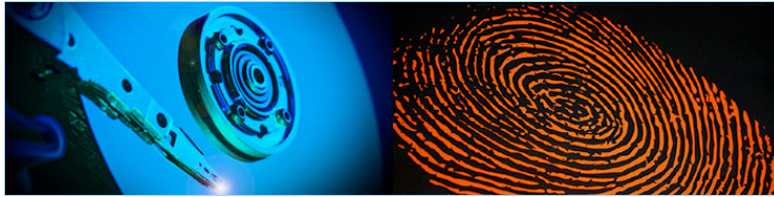
After we receive your drive, we will quickly perform a Diagnostic Analysis. We will then contact you via email and telephone to discuss your options including:

- How much data can or can not be recovered. How you would like the data returned to you (on a new Hard Drive, CD/DVD).
- Approximate estimated data recovery timeline
- We will then perform the recovery per your instructions and return the Data to you via US Postal Service or the carrier of your choosing.
- If you have any questions, you can email us at fmds.spl1@forensic-mind.com or call us at 517.281.6221.

PLEASE NOTE: We may not be able to answer some specific questions about your data recovery situation until we perform a Diagnostic Analysis on your drive.

Drive Submission Address:

Forensic Mind Data Services
4800 Collins R.D., P.O. Box 27475
Lansing, Michigan 48909.



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Diagnostic Fee

The diagnostic fee is a non-refundable charge. The fee required is \$50.00 US. This fee is assessed for data recovery only and applies to all digital media including but not limited to flash drives, digital camera media, SD/MMC/MS cards, hard drives, ipods, and optical media (CD-R, DVD+/-R). This fee will be applied only if no data is recovered. All other data recoveries are subject to the hourly fee. There is a two (2) hour minimum for data recoveries

Current fee of 07/09
\$125 per hour

Please Print and fill out the form, sign, and include it with the media/equipment and diagnostic fee.

Contact Information

Company / Organization:	Contact:
Address:	Telephone:
Fax:	
Email:	Cell/Pager

Media Information

Media Type: HARD DRIVE ___ CD/DVD ___ USB DRIVE ___ FLOPPY ___
Other (specify) _____

May we open the drive? ___ YES (This may void warranty) ___ NO

Manufacturer:

Model: Size: Interface: (IDE/SATA/SCSI/SAS)

How long has drive or device been in service:

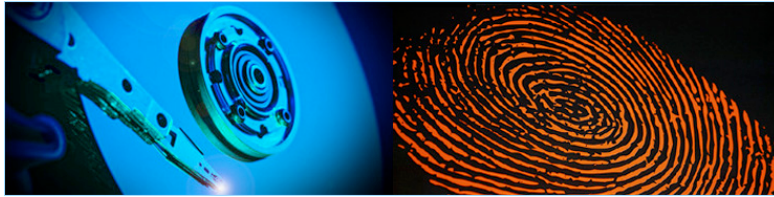
Operating System and Version (if system drive):

Serial #:

How much data is on the media (if known)? GB ___ MB ___

What file system is the media formatted with: FAT32 NTFS EXT2/3
HFS+ OTHER

Media Information



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Please give a brief description of the events surrounding your drive/device failure:

What are the most important files, folders, and directories to be recovered? Please be specific as to file names, folder names, file types.

Payment information

Enclose the minimum diagnostic fee. Payment in the form of Check, Credit Card, Money Order, or Cashiers Check. Note that personal checks will delay your data recovery while the bank clears your check. Credit card payments are subject to 2.9% processing fee.

Payment Type Visa MasterCard AMEX Cashiers Check
 Money Order Personal Check #

Card Holders Name:

Credit Card Number:

Card Holders Billing Address:

Credit Card Expiration Date:

Card Holders Billing City, State, Zip:

I agree to the payment terms in the Credit Card Holders Agreement.

Card Holder Signature

_____ Date _____

NOTE: On all credit card payments, the Drive will be shipped to the exact address as listed on the credit card account. Shipping to a different address is not possible.

Return Shipping Information

Return Shipping Method

UPS Next Day Air with Saturday Delivery

UPS Next Day Air UPS Second Day Air UPS Ground

US Postal Service

Return Shipping Payment Method

Use my UPS Account Number: _____

Use my Fed Ex Account Number: _____



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Bill the shipping to my credit card as listed above

Bill me the return shipping

Return Shipping Insurance

Forensic Mind Data Services is not responsible for any damages, loss, and theft incurred during shipping. Data and drives may be moved or shipped between our facilities for faster recovery. We recommend insuring your drive. Check one of the following:

I am purchasing shipping insurance from the shipper (UPS or FedEx). I fully understand the coverage this insurance provides. (Only covers replacement of hardware, not data.). Value to insure:

\$_____ If this area is left blank, your data will not be insured.

I am declining shipping insurance. Forensic Mind Data Services will not be held responsible for any damages, loss, or theft that occurs in transit.

Terms of Service

Service Limitations

We cannot guarantee the amount of data that can be recovered. If we determine that not all data can be recovered, we will call you for your approval before completing the repair. We cannot guarantee the amount of time spent on the recovery. Most standard recoveries take no more than six workdays.

Waiver of Liability

I grant permission to Forensic Mind Data Services (hereafter known as "FMDS") to perform any action they deem necessary to attempt to repair my hard drive. I understand that this procedure is a final attempt towards the recovery of data from the hard drive and could result in loss of part, or all, of the data stored thereon and that Forensic Mind makes no warranty or guarantee as to the success of its attempts. I consider that any such data is already effectively destroyed or lost and as such is of no value. Furthermore, I release FMDS from any liability for any data loss which may occur during or as a result of this procedure I also release FMDS from any liability for any theft, loss, damage, or, destruction to the drive and any other hardware, diskettes, or other media sent to FMDS in connection with this Waiver.

ALL CLAIMS FOR LIABILITY AND/OR LOSS INCLUDING WITHOUT LIMITATION ANY INDIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES WHICH MAY OCCUR AS A RESULT OF ANY FMDS ACTION (OR INACTION) ARE HEREBY EXPRESSLY WAIVED.

I also understand that, even if the drive is successfully recovered, there is a possibility that individual files and directories on the drive may still be inaccessible due to the type of damage originally sustained. In addition, I agree to pay the applicable fee for these services by FMDS, plus shipping and handling expenses as required by FMDS. Shipping insurance and other expenses are the undersigned's responsi-



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bility. If the customer cancels or decides not to proceed with the full data recovery, Drives submitted will not be returned unless arrangements are made with FMDS prior to submission. Returned Drives are subject to a reassembly fee. Drives left with FMDS for over 30 days become the property of FMDS. The Customer agrees that the total liability of FMDS or its contractors or suppliers to the Customer shall in no event exceed the total sums paid by the Customer to FMDS.

I agree to accept the responsibility for shipping the system, hard drive, or data media to FMDS. FMDS will not be responsible for any damages, loss, or theft incurred during the shipping process and any loss or claim against such agents shall be solely by and on the behalf of the undersigned. If making all or any portion of balance due payable by credit card, I agree to the terms in the Credit Card Holders Agreement.

Criminal Activity

I understand that if FMDS should come across any suspected criminal activity in the course of their recovery effort, the findings will be reported to the appropriate authorities for review and action. I further understand that I agree to pay FMDS for their services rendered should suspected criminal activity be detected and that all services by FMDS will be ceased pending any action by the appropriate authorities. Furthermore, I understand that FMDS cannot be held responsible or liable for reporting to the appropriate authorities any suspected criminal activity that may be discovered during the course of their services.

I agree to all of the foregoing conditions.

Authorization

Declaration of Ownership and Authority

I am the legal owner of the hardware described above and/or am the duly authorized representative of the Company listed above. My signature will attest to the fact that I am the legal owner, or an officer of the above named company, or am empowered by its governing body, to act in its behalf for matters relating to the attached Agreement in regard to the property identified above.

Authorized by(Print):

Title:

Signature:

Date: