



Password Removal Request

Requestor Name: _____

Case No. (if known) _____

Requester Fax No: _____

Attention: Password Removal Team

Date of Request: _____

*One of the following options must be completed and faxed to us for Hewlett Packard OmniBook/Pavilion password removals. Please use **either** Section A **or** Section B.*

By signing and submitting this form requesting a BIOS password removal, you agree that Hewlett Packard will not be held responsible for any consequences arising from the removal process.

Requester's name:

(print) _____ (sign) _____

Requestor's Phone Number: _____

A) Proof-of-Ownership with the following information

1. Serial Number (e.g., TW12345678, US12345678, etc.) _____
2. Product Number (e.g., F2083WT, F1980KT, etc.) _____
3. Date of purchase _____
4. Attach copy of sales receipt, invoice, etc.

B) Attested Ownership with the following information:

1. Requester's address (print) _____

2. From whom was the notebook acquired? (Company, store, gift, etc) _____
3. Serial Number (e.g., TW12345678, US12345678, etc) _____
4. Product Number. (e.g., F2083WT, F1980KT, etc) _____
5. A secondary signature, (e.g., manager, spouse, previous owner) attesting ownership:
(print) _____ (sign) _____

PLEASE FAX THE ABOVE PROOF-OF-OWNERSHIP TO THE NUMBER PROVIDED TO YOU BY HP SUPPORT

Possible fee based support, Once all information is received, we will contact you via phone or fax to provide information you need to complete the password removal process.