

Wireless Equipment Replacement Affidavit FAQs

How to Submit the Required Documentation

1. Print, fill out, and sign the Claim Affidavit.
2. Scan or take pictures of both the completed Claim Affidavit and your valid photo identification.
3. Securely upload both documents and track your claim at protect.likewize.com/boostinfinite under My Plan.

Once submitted, please allow up to 2 business days for your documentation to be reviewed. Additional time may be required if submitted by mail. If you provide your email address, we will contact you once we have received your documents. If you have not received communication regarding the status of your Replacement Request within 2 business days of submitting your documentation, call us at (844) 834-5583.

What Types of Identification are Acceptable to Submit?

Valid government-issued photo identification acceptable to submit are listed below.

- Driver's License
- State or Federally Issued ID
- Resident Alien Permit
- Passport
- Immigrant Visa

In order to ensure that the photo identification you submit is legible, the identification must be a colour copy, contain the enrolled Subscriber's name as well as photograph, and cannot be expired. If the identification you submit appears altered, forged, illegitimate, or is illegible, we may be unable to proceed with your Claim.

What if I Don't Have the Requested Information?

If you don't know or have an email address or contact number(s), go ahead and submit the form. All information in Section II, Replacement Request Details, is required. If you do not provide the required information, additional documentation and time for review may be required.

What Else do I Need to Know?

You can view all the terms and conditions applicable to your Replacement Request here: protect.likewize.com/boostinfinite.

After your Replacement Affidavit has been processed, you may be instructed to call (844) 834-5583 to continue your Replacement Request.

Wireless Equipment Replacement Affidavit

IMPORTANT LEGAL NOTICE: A person who knowingly makes or presents a false or fraudulent Affidavit with the intent to injure, defraud, or deceive may be guilty of a crime and may be subject to fines and confinement in prison. When fraud is discovered, Likewize Device Protection will take appropriate steps to stop such fraud and will pursue all available legal

Section I: Subscriber Information

Enrolled Subscriber's Printed Name _____ Mobile Number _____
Wireless Carrier _____
Billing Address _____
City _____ State _____ Zip Code _____
Email Address _____ Contact Number(s) _____

You must submit a valid copy of one of the government-issued IDs listed below. Please select the type submitted.

- Driver's License State or Federally Issued ID
 Resident Alien Permit Immigrant Visa
 Passport

Section II: Replacement Request Details

If your device has been lost or stolen, before submitting this Affidavit you must report your device as lost or stolen to your wireless carrier and the device must be suspended or deactivated on your carrier's network. By submitting this Affidavit, you acknowledge and certify that you have reported your lost or stolen device to your wireless carrier and have requested that the device be suspended or deactivated on your wireless carrier's network.

Device Make/Model _____
Loss/Incident/Failure Date _____

My device is (select one): Stolen Damaged Malfunctioning Lost

Please describe the loss, incident, or failure:

Section III: Sworn Statement

I hereby make a Replacement Request against the insurance company/service contract provider as shown on this Affidavit. I acknowledge that if any property which is the subject of this Replacement Request and which is replaced or paid for by the insurance company/service contract provider is recovered at any time, it is the property of the insurance company/service contract provider and must be returned to the insurance company/service contract provider. I understand that if I fail to return such property, I am subject to, and authorize, a non-return fee using the method of payment used to originally file this Replacement Request. A certified electronic signature shall have the same effect as an original signature.

I swear/affirm that the wireless device I am claiming is owned by me and that the information provided above is true and accurate. I understand that any false or misleading statement made herein is fraud and I may be found guilty of a crime. Likewize Device Protection, LLC will take all legal actions possible in the event of a fraudulent Replacement Request.

Customer's Signature _____ Date _____