



Service Request Form

Contact Name: _____

Company Name: _____

Telephone: _____ Fax: _____

Email Address: _____

Billing Address:

Shipping Address:

Reason: Repair: _____ Calibration: _____ Exchange: _____ Return for Credit: _____

If calibration requested, do you require ISO certification: Yes _____ No _____

Instrument Model: _____ Serial Number (S/N): _____

Shipping Method: _____ Account # (if applicable): _____

Customer Comments:

How to Proceed (Important):

A formal purchase order (with credit approval) or alternate form of payment must be received prior to proceeding with a service order. Once the order and payment method are finalized, a formal order number will be issued by our service team and return instructions provided.

A credit card authorization form is attached (if needed). You may also call or e-mail us with your payment details.

**** A \$50.00 evaluation fee applies to all service requests. This fee is waived if service is purchased. ****