**CUSTOMER REPAIR/WARRANTY REPORT**

|  |  |
| --- | --- |
| **Company/Site** |  |
| **Contact Name** |  |
| **Phone Number** |  |
| **Email Address** |  |
| **Product** |  |
| **Model Number** |  |
| **Serial Number** |  |
| **Accessories Shipped** |  |
| **Return Address** |  |
| **Shipping Method** |  |
| **Invoice Address** |  |
| **Purchase Order No.** |  |
| **Date Required By** |  |
| **Fault / Damage** |  |
| **Calibration Required** | YES / NO |
| **Other Information** |  |

To assist us in evaluating or repairing your equipment, we kindly request you fill in this form as comprehensively as possible. Please attach a copy of this form to the returned goods, and please send a copy either by fax or email.

Please enclose all relevant accessories supplied with the equipment unless agreed otherwise, this enables us to evaluate your equipment as a complete system.