

## Repair Request Form

Please complete the form below with the required information.

Please include a copy of the completed form with your instrument when returning for repair.

**Repair Facility**  
5508 Old Wake Forest Rd  
Raleigh, NC 27609  
(919) 872.8001  
(919) 872.8003 (Fax)

Date: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_

Office Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Estimate: Yes \_\_\_\_\_ No \_\_\_\_\_

Detail description of problem with instrument:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Please include a Calibration Certificate, (\$45 charge)

(All instruments that are repaired will have a calibration sticker placed on the instrument unless you request otherwise.)

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