

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 27616
(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.)