



PRÜFTECHNIK

CALIBRATION AND REPAIR FORM

All fields are required. Please send a copy of this form via email.

Date	<input type="text"/>		Repair	Calibration
Company	<input type="text"/>	Plant	<input type="text"/>	
Address	<input type="text"/>	City	<input type="text"/>	
State	<input type="text"/>	Zip	<input type="text"/>	
Contact	<input type="text"/>	Phone	<input type="text"/>	
Fax	<input type="text"/>	Email	<input type="text"/>	
Rep.	<input type="text"/>			
Product	<input type="text"/>	Serial No.	<input type="text"/>	

Reason for Return:

By signing below, I authorize PRUFTECHNIK INC to perform service on the referenced product up to an amount of \$1,050.00. Please invoice using PO # _____ .

Name:

Sign/Date:

Terms of sale are NET 30, FOB Philadelphia unless otherwise agreed. Pre-paid ground shipping & handling will be charged in addition to the above amount. Handling fees are waived if customer provides own common carrier account number.

USA

PRUFTECHNIK INC.
ATTN: REPAIRS & CALIBRATIONS
7821 BARTRAM AVENUE
PHILADELPHIA, PA 19153

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FAX: (215) 893-3902
PRODUCTSERVICE.NA@PRUFTECHNIK.COM