

Repair Returns Form
Fax to: +44 (0) 161 371 6010

elcometer®
www.elcometer.com

Form Completed by:

Name: _____

Company: _____

Fax No: _____ **Tel No:** _____

E-mail: _____

Your Reference: _____

Product Part Number: _____ **Serial No:** _____

This repair form is taken in lieu of an order and we accept the fixed repair charge and / or inspection charge as stated in the published repair price list.

Signed: _____

Please provide below details of all defects and faults reported by the user / customer

Is the product within Elcometer's warranty Period:

Yes

☐

No

☐

Shipping Instructions (please tick the appropriate box)

Urgent: I agree special Courier Shipment charges

☐

Please return in the next scheduled shipment after repair

☐

Please ring me when the repair is ready for shipment

☐

Elcometer Office Use Only:

Date Form Received:	
Return Authorisation Number:	
Warranty Return Authorisation Number (if applicable):	
DHL Transit Number (Warranty returns only):	