

**SERVICE REQUEST FORM**

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

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

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

Phone: \_\_\_\_\_

*\*Must be authorized to approve repairs*

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

Fax: \_\_\_\_\_

<p style="text-align: center;"><u>Billing Info</u></p> <p>Address: _____ _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p> <p><input type="checkbox"/> PO Number: _____</p> <p><input type="checkbox"/> Visa   <input type="checkbox"/> MasterCard   (PO Required if No CC)</p> <p>Credit Card No: _____</p> <p>Expiration Date: _____ CCV: _____</p> <p>Signature: _____</p>	<p style="text-align: center;"><u>Shipping Info</u>   <input type="checkbox"/> (Same as Billing)</p> <p>Address: _____ _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p> <p><b>Return Via:</b></p> <p><input type="checkbox"/> UPS Ground   <input type="checkbox"/> UPS Blue   <input type="checkbox"/> UPS Red</p> <p><input type="checkbox"/> Local Pickup</p> <p>Location: _____</p> <p>Other: _____</p>
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**Unit Information**

Make & Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Service Required: \_\_\_\_\_

Description of problem: \_\_\_\_\_  
\_\_\_\_\_

Additional Info: \_\_\_\_\_

Yes, I would like to receive a rental unit with 15% discount off rental fees while my unit is being repaired. Please send a unit to the above shipping address immediately.

Please RUSH my repair for an additional \$100 (does not apply to fall blocks).

I acknowledge that should repairs be declined, a minimum evaluation charge of \$75 plus shipping and handling will be charged per unit. Further, unit repairs that have not been authorized within 15 days of evaluation are assumed declined and will be returned with the \$75 evaluation charge. I also certify that the equipment described above has been thoroughly cleaned and decontaminated of all chemical, biological and radioactive contaminants and also certify that the returned unit is safe for unprotected human contact.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*Must be signed before any work is done to your equipment

Safeware Information   Customer ID: \_\_\_\_\_   SWO Number: \_\_\_\_\_

7079 Oakland Mills Rd  
Columbia, MD 21046  
800-331-6707  
301-683-1242 F

801 W. 116th Suite 400  
Westminster, CO 80234  
800-341-9408  
303-496-3400 F

510 Eastpark Court, Suite  
120 Sandston, VA 23150  
800-814-7898  
804-800-4490 F

2445 Hilton Dr. Suite 119  
Gainesville, GA 30501  
770-963-0207  
678-450-8698 F

5710 S. 32nd Street  
Phoenix, AZ 85040  
800-331-6707  
410-309-1544 F

[techservices@safewareinc.com](mailto:techservices@safewareinc.com)

[www.safewareinc.com](http://www.safewareinc.com)

**\*\*Mark Packages ATTN TECHNICAL SERVICES**  
**\*\*Do Not Ship Calibration Gas with your Instrument**  
An additional \$35 hazmat fee will be assessed if shipped back to you.