

SERVICE REQUEST FORM

CONTACT INFORMATION

Name _____
Company / Organization _____
Address _____
City _____
State / Province / Region _____ Postal Code _____
Country _____
Phone _____
E-Mail _____

ORDER DETAILS

Make & Model _____
Serial Number _____ (For Scopemeters, usually begins with "DM")
Problem Description _____
Payment Method Credit Card PayPal Check / EFT Net 30
Return Shipping Method _____

SHIPPING INSTRUCTIONS

- ✓ Pack your unit in a sturdy box with adequate cushioning (peanuts, foam, Kraft paper, bubble wrap, etc.)
- ✓ Include this completed service request form
- ✓ Ship your unit to our receiving address listed below
- ✓ If possible, insure your shipment against damage or loss for the replacement value of your unit
- ✓ Please do not send any accessories (probes, charger, etc.) with the unit unless you need them repaired

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If desired, cut on the dotted line and use the bottom portion of this form as the shipping label

SHIP TO

ScopemeterRepair.com
5641 Broyles Rd
Hartville, MO 65667
United States
(888) 600-2542