



RETURN FORM

Form regarding return of an instrument or apparatus

Fill out the form, sign it and send it together with your return delivery.
Please note the form has to be visible on the outside of the package.

Contact information:

Company:

Address:

Contact person:

Zip code:

City:

E-mail:

Phone:

Dept.:

Order/appointment no.:

Who did you set up this return with?

Reason for return:

This return is made in appointment with:

Service

Borrowed return

Return by agreement

Repair

Complaint

Calibration

LEASE NOTE: As a general rule, non-stock items are not returned.

Approved returned goods are credited with a deduction of 20% of the invoice value.

Turn to fill out the rest



What is returned?

Fill out information on the apparatus or instrument that you are returning:

Product:

Model/fabrication:

Serial number:

If returned for repair or complaint please fill out below.

Detailed error description:

Is the instrument:

Cleaned:

Yes No

Potentially radioactive:

Yes No

Safe to transport:

Yes No

Safe to handle:

Yes No

What has the item been in contact with?

The undersigned hereby declare that the above information is correct and adequate, as well as ensuring appropriate packaging and transport to:

Mikrolab - Frisenette A/S

Jens Juuls Vej 20

DK-8260 Viby J

Date

Name (sign here)