

REPAIR AND CALIBRATION REQUEST FORM

To allow us to better understand your repair requests, we suggest you use the following outline when calling and include a copy with your instrument to be sent to the Racal Repair Facility.

Model _____ Serial No. _____ Date _____

Company Name _____ Purchase Order # _____

Billing Address _____

City

State/Province

Zip/Postal Code

Country

Shipping Address _____

City

State/Province

Zip/Postal Code

Country

Technical Contact _____ Phone Number () _____

Purchasing Contact _____ Phone Number () _____

1. Describe, in detail, the problem and symptoms you are having. Please include all set up details, such as input/output levels, frequencies, waveform details, etc.

2. If problem is occurring when unit is in remote, please list the program strings used and the controller type.

3. Please give any additional information you feel would be beneficial in facilitating a faster repair time (i.e., modifications, etc.)

4. Is calibration data required? Yes No (please circle one)

Call before shipping

Note: We do not accept
"collect" shipments.

Ship instruments to nearest support office
listed on back.