

Date last serviced (if known):

## AMETEK/Brookfield

## 2024 Service/Calibration Request Form

Providing us with the following information will help us to service your equipment more efficiently. Please fill out and return a copy of this form <u>with your instrument</u> . <u>Ship to the address above</u> , <b>Attention: SERVICE</b>	
Can-Am Instruments and the original equipment manufacturer recommends that all instruments be returned for annual calibration to ensure that your system continues to provide the same accuracy you have come to expect from our products.	
1. INSTRUMENT INFORMATION (fill one form for each) Today's Date:	
Model: Serial Number:	
2. YOUR COMPANY INFORMATION	
Company:	
Contact:	Tel.:
E-mail:	
Billing Address:	Shipping Address:
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	-
Payment: 🛛 Visa 🖾 Mastercard 🖾 AMEX O	Purchase Order #
<b>48-RUSH SERVICE</b> requested (\$195.00 extra fee, contact us before shipping to reserve the date)	
Return: OUPS OPurolator OFEDEX OOther (Specify) Carrier Acct #	
<ul> <li>Use original carrying case</li> <li>Do not send the stand</li> <li>Spindles and/or accessories are NOT required; if shipped they will be inspected at no charge</li> <li>For cone and plate systems, send the cones and sample cups</li> </ul>	
IMPORTANT!! The health and safety of our and your employees is of utmost importance. Please read and confirm the following by signing below:	
I acknowledge that all equipment being returned has been cleaned and disinfected prior to shipping to Can-Am Instruments.	
Signature: Name and Title:	
3. SERVICE INFORMATION	
If you contacted Can-Am before returning this instrument, who was it?	
Only recalibration is required	