

SERVICE REPAIR FORM

1055 Kingsland Dr Batavia IL 60510 630-406-9666 phone 630-406-6195 fax

Billing Info:
Objective lefe
Shipping Info:
Check for Pick-Up at ESS:
Contact Name:
Phone #:
Email Address:
Please Describe in Detail The Problem with the Unit(s):
Instrument Model: Serial #:
Please Do Not Send Any Accessories Such as Strap, Case, Calibration Kit, etc. Only Items that Need to be Repaired!
This Form must be sent with units. If received
without form, repairs will not be processed. A possible bench fee of up to \$125 may be charged if unit is not repaired or replaced.
Signature:
Print:
ESS USE:
Rec'd By:
Service Center:
Date: