

Please email us for a
SERVICE REQUEST #
prior to shipping.

SERVICE REQUEST FORM

Print and Ship with Pipettes to:

Calibration Services, LLC

via FedEx or UPS:

2000 Cave Creek Road

Batesville, AR 72501

Email: service@pipetterepair.us

Contact

Lab Head

Institution

Telephone

Department

Email

SHIPPING: Complete Return Address (including building & room#) – No P.O. Boxes

BILLING: Complete *Email* + Street Addresses (for Purchase Order or Credit Card):

☐ PURCHASE ORDER # _____

☐ Credit Card – Invoice will be emailed with a “View & Pay Invoice” secure link

NOTE: A fee will be added for credit card processing

PLEASE CHECK ONE:

- ☐ Complete any repairs necessary after inspection and return
☐ Inspect and call with estimate before completing repairs (increases turnaround time)

If CALIBRATION CERTIFICATES are required, please complete the following:

- ☐ Include “As Found” Calibration Certificates
☐ Include “As Returned” Calibration Certificates

DATE DUE: ☐ 3 months ☐ 6 months ☐ 12 months

TEST METHOD: _____

Specific Problems to Note:

IMPORTANT: INCLUDE SEVERAL OF YOUR TIPS FOR ACCURACY IN CALIBRATION
Ship in boxes only (wrap pipettes separately and include padding in box) DO NOT use envelopes.

Method of Return Shipping (Check One):

- ☐ Priority Overnight ☐ Std Overnight ☐ 2nd Day Air ☐ Express Saver
☐ Do Not Insure ☐ Insure Shipment for \$ _____ (*increases shipping costs*)