



PZ HTL S.A.
 Daniszewska 4
 03-230 Warsaw; Poland
 tel. +48 22 492 19 00 ext. 34
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Service Request Form

Product return form for calibration, repair, or warranty repair

Distributor claim number/stamp/signature:

Ship to (Company name, return address, or seal):

Customer contact information: (Name, phone no., email):

	Product Name or Symbol	Serial No.	Service Code*	Problem Description (e.g., Repair)/Customer Suggestion/Purchase Date
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Offered services: Repair [N]; Repair under warranty [G]; Calibration level 1 [K]; level 2 (3x4) [W4]; level 3 (3x10) [W10]*
 If the ISO 17025 pipet calibration is requested, please fill in the **Calibration Request Form**.
 Refer to price list for more details. Price list is available upon request.

Please name all delivered accessories, samples, or other test data required to analyze/complete the service request.



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Decontamination Form*

Indicate Substances Handled:	NO	YES	Specify Substances:
Health-damaging proteins	<input type="checkbox"/>	<input type="checkbox"/>	
Risk group 1/2 biohazardous agents	<input type="checkbox"/>	<input type="checkbox"/>	
Risk group 3/4 biohazardous agents	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Instrument(s) not accepted for service.
Health-damaging liquid solutions	<input type="checkbox"/>	<input type="checkbox"/>	
Radioactive substances	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Instrument(s) not accepted for service.
Other substances:	<input type="checkbox"/>	<input type="checkbox"/>	

I confirm that:

- ▶ Instruments present no hazard due to contamination by any substances listed above.
- ▶ Before return, instruments have been carefully cleaned and decontaminated with:

Safety recommendations

***Notice:** For the safety of our employees, we ask you to complete this document thoroughly and attach it to the returned instrument(s). By accepting authorization of this document, the user assumes all liability risks which would result from use of contaminated units. We will be unable to process your service request if the instrument is provided without the declaration completed and signed.

Name and signature

Date

Special requests, customer/distributor suggestions