



Your Calibration, Measurement & Modeling Solutions Partner!

# Calibration & Repair Service Request

### Company- End User Information (if applicable)

Location  
Address  
City/State  
Phone  
Fax

### Bill to Address

Location  
Address  
City/State  
Phone  
Fax

### Ship to Address

Location  
Address  
City/State  
Phone  
Fax

**Kit/Part #1 Model, Option, Serial Number**  
**Kit/Part #2 Model , Option, Serial Number**  
**Kit/Part #3 Model, Option, Serial Number**

**Date Calibration Kit(s)/Part(s) will arrive at Maury:**

### Calibration Requirements

**Quality Requirements:** ISO9000 Standard Calibration    ANSI/NCCL-Z540    ISO/IEC17025  
Other-see Special Instruction

**Data Required:**                      Yes              No

**Measurement Uncertainty Required:**              Yes              No

**Statement of Compliance:**              Yes              No              Other

If the client requests another method, this method shall be documented. (based on test results observed within specified limits and with no reduction by the uncertainty of the measurement taken)

**Options below for repair services only:**

**No Calibration              Repair              Warranty Repair**

Date/Sales order/PO# of original purchase

Reported issue:                      Yes                      No

Ongoing issue:                      Yes                      No

### Payment information

**Equipment Shipping- Preferred Carrier #**

**Special Quality Instructions: (if applicable)**

**Completed by:**

**Title:**

**Date:**

**Email:**