



EQUIPMENT RETURN FORM

*** UNCONTROLLED COPY ***



ISO 9001

COMPLETED FORM CAN BE RETURNED WITH INSTRUMENT OR FAXED IN ADVANCE TO
0844 334 0101 OR +44 (0) 1604 498040

Customer Details

Company:	Contact Name:
Address:	Dept:
	Tel:
	Fax:
	E-mail:
Post Code:	

Equipment Details (Please complete one form for each piece of equipment)

Equipment Make/Model	Serial Number
Calibration Due Date	

Calibration/Service Requirements

<input type="checkbox"/> Standard Calibration	<input type="checkbox"/> Standard Aerosol Generator Service (non-certified)
<input type="checkbox"/> ISO 21501-4 Calibration	<input type="checkbox"/> Aerosol Generator Output Test (certified)
<input type="checkbox"/> ISO 11171 (Liquid Particle Counter)	<input type="checkbox"/> Other Service Requirements
<input type="checkbox"/> ACFTD (Liquid Particle Counter)	<input type="checkbox"/> Standard Turnaround (within 7 working days subject to conditions)
<input type="checkbox"/> Repair Details :-	<input type="checkbox"/> Max Value £
<input type="checkbox"/> Priority Turnaround *	<input type="checkbox"/> Return by carrier
<input type="checkbox"/> Purchase Order No.	<input type="checkbox"/> Customer collect

* Surcharge may apply – contact OptiCal Sciences for details

COSHH Regulations – Substances Hazardous to Health

Due to Health & Safety requirements completion of the statement below is required by a suitably qualified person confirming the above equipment presents no hazard or risk as a result of exposure to toxic or hazardous substances. Any equipment arriving at OptiCal Sciences Limited without the COSHH statement will be placed in secure quarantine until a suitable statement has been obtained.

We thank you for your co-operation.

Please state to which substance(s) (if any), this equipment has been exposed.	
Is the substance(s) hazardous to health	YES/NO/DON'T KNOW
I declare this equipment has been decontaminated/cleaned and is safe to handle	
Signed:	Print:
Position:	Date:

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