

Scottech use only

Date Received

Initials

JOB #



### Return Merchandise Form

To ensure efficient processing of your return, please fill out as much as possible and include with the item

Return all goods to:

Scottech  
89 Colombo Street  
Hamilton 3204  
New Zealand

EQUIPMENT DETAILS	
Item	
Serial No.	
Accessories Included <small>(e.g. cables, cases, batteries)</small>	
Fault	
Installation environment  Include decontamination details and MSDS sheets if relevant.	Describe the type of location or application this equipment was installed in and exposure to potential health & safety hazards (eg sewer, fungicides).
Repair Purchase Order	Scottech Contact
<input type="checkbox"/> Quotation required before repair, a minimum workshop charge of \$45 may apply	

YOUR DETAILS		(please tick if you prefer contact by phone or email)
Contact Name		
Contact Email		Preferred <input type="checkbox"/>
Contact Phone		Preferred <input type="checkbox"/>
Company & Branch		
Return Delivery Address		
Bill To		