Initials

## **Return Merchandise Form**

Form 410 r1.1



Return all goods to: Scottech 9 Kells Place Frankton Hamilton 3204 New Zealand

## **Equipment Details**

Item:			
Serial No.:			
Included Accessories: (i.e. batteries,cables, cases etc)			
Fault: Attach additional information/data as required			
Installation Environment: The type of location or application this equipment was installed and exposure to potential health & safety hazards (i.e. sewer, fungicides etc)			
Repair Purchase Order:		Scottech Contact:	
Purchase Order Limit: \$		We will contact you if repairs are e	xpected to exceed this limit)
Or:	Quotation required before repair	(an evaluation charge will apply to	o reflect technician time)
	To ensure efficient processing of your return, please provide as much detail as possible and include this form with the item. A minimum repair charge of \$45 may apply For H&S reasons, items must be sent clean clean and free of toxins. If not, a decontamination fee may apply, or items may be returned unserviced		

## **Your Details**

Contact Person:		
Contact Email:		Preferred
Contact Phone:		Preferred
Company & Branch:		
Return Delivery Address:		
Or:	To be reinstalled by Scottech staff	
Bill To:		