Scottech Internal Use Only		
Date Received:	Initials	JOB#

Return Merchandise Form

Form 410 r1.1



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 a	re expected to exceed this limit)	
Or:	Quotation required before repair (an evaluation charge will app	y to 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:			