



INSTRUMENTATION & SPECIALTY CONTROLS DIVISION
11 Commerce Boulevard, Middleboro, MA 02346 USA
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PROCESS RETURN FORM

This form applies to all Process/In-line Instrumentation.

IMPORTANT:

Please complete all applicable items and return this form with the unit for repair to Brookfield at the address above.

CONTACT/USER INFORMATION

Primary Contact: _____ Date: _____

Phone No. _____ / Fax No. _____

Email: _____

BILLING:

Company: _____ Contact: _____

Address: _____

SHIPPING:

Company: _____ Contact: _____

Address: _____

INSTRUMENT INFORMATION

Model: _____ Serial No: _____

Please describe all problems/malfunctions:

MATERIAL INFORMATION

Material Measured: _____

Has the unit for repair been exposed to hazardous materials? YES NO

If the instrument has been exposed to hazardous material, please decontaminate the unit and include the appropriate MSDS sheet.

Method of Decontamination: _____

Decontamination performed by: _____

SERVICE AND RETURN INSTRUCTIONS Please check the service(s) required and describe problematic symptoms above.

- A written estimate is required. Rush priority service (additional rush fees may apply).
Charges have been pre-approved. Normal priority service.

RETURN SHIPPING F.O.B. Middleboro, MA

FedEx: Ground Std. Overnight Pri. Overnight 2nd Day

FedEx Account Number: _____

UPS**: Ground Next Day 2nd Day Collect

**Your account number is required for all UPS shipments: _____

