



Service Evaluation Form

This form **MUST** be completed and enclosed with instrument to be serviced.

Note: Please ship items in their original shipping container.

Contact information: Customer Number _____ (contact Customer Service)
 Name _____ Phone: (____) _____
 Fax: (____) _____ Email: _____

Bill to Address:

Ship to Address:

Instrument Serial Number: _____

Detailed Description of Problem:

*****Hazardous Material Warning! – DO NOT return gas cylinders with instrument!*****

Note: An evaluation fee of \$39.50 for handheld instruments or \$79.00 for IR evidential instruments will apply to estimates which are not repaired.

I Authorize Repairs Up To: All \$250 \$500 \$750 Other \$ _____
 Purchase Order Number _____

Authorized By:

Name (Please Print)

Title

Signature

Date

Ship to:

CMI, Inc.
Attn: Service Dept.
316 East Ninth Street
Owensboro, KY 42303

No, please send estimate before repairs are made. An estimate will be faxed before performing any repairs and may cause delays in service.