SERVICE ORDER FORM

If you suspect that a fault has developed in your isolation system, please fill in the service order form and send by fax/email to the address below. Our service department will contact you by return. If it proves to be necessary to return the system for repair, you will be issued with an **RMA number** which should then appear on all shipping documents.



Address:

Device details:	Model:	AVI	TS-	 Others:
	Serial-Nr.			
	Purchased via:			
	Date of purchase:			
Company name:				
Contact Person:				
Street:				
ZIP Code/City:			Country:	
Phone/Fax:			Email:	
Address for return:				
Detailed Service/Fa	ailure Description:			

Shipping instructions – do not ship unless you have been issued with an RMA number:

Please ship the TS systems **only in locked transportation mode** (see instruction manual page 11). If locking is impossible, please press the top plate against the frame and tighten the whole system with a tape to ensure that the top plate cannot move during transportation.

If available, please use the **original boxes**:

- For TS systems with the rigid foam corners
- For AVI systems with the shaped rigid foam spacer

Other transport boxes should allow **10cm (4") safety distance** to all walls/sides. Please fill the gap with protective material.

Date:	Signature:
Dato:	Oignataro.