

RETURNS FORM

This form must be completed and sent back with any returned items. If you have any questions regarding completing this form please call us on 1300 309 881 and we can assist you.

Name		Today's date
Company or Organisation (optional)		Your invoice number
Phone number		Invoice date
Address		Product code
Detailed description of the problem and/or reason for return (Please do not just write "Faulty")		
Please tick, is the product being returned	ed for:	
Warranty replacement/repair	Return for refund as pe money back guarantee	
HK Calibrations internal use o	only	
Date received	Date resolved	Replacement sent to customer
Fault details/other information		
Course of action		
Outcome		