



Customer Equipment Repair Request Form

Our current repair turn-around time is 3-5 business days, from when we receive your flowmeter until we ship it out completed.

Flowmeters that require a repair charge will be completed 3 business days from receiving your approval and payment.

Please fill out all fields, and please use a separate form for each piece of equipment.

Please type directly into the form below, print it out, and include it with your repair shipment.

Customer Name: _____

Street Address for UPS/FedEx (no PO Box): _____

City: _____ State: _____ Zip: _____

Is this address: Residential Commercial

Phone: _____ Email: _____

Which model flowmeter are you shipping in for service*? _____

Serial Number: _____

*Accessories: Please do not include nasal hoods, scavenging tubing, manuals, stands w/wheels, mounts, etc. We are not responsible for any accessories included with the flowmeter, they are sent at your risk.

What issue are you having with the unit? (Please be *very* specific)

If requesting flowmeter service, please include EITHER:

Authorization to charge \$200 to credit card:

I want my flowmeter returned to me:

Without Signature Required. (MTS is not liable after successful delivery is made.)

With Signature Required (I authorize a \$4 charge for this service to my credit card below. **Must include credit card information for this to be processed**). HIGHLY RECOMMENDED

OPTIONAL:

I am pre-approving charges to my credit card for: Non-warranty repairs in the amount of \$ _____

With **Signature Required** in the amount of \$4 (return shipping purposes only)

Credit Card # _____ Exp ___/___ CCV _____

Please wrap your unit well in bubble wrap and be sure to include all paperwork before sealing package.

Send to:

Medical Testing Solutions

1001 NW 31st Ave

Pompano Beach, Florida 33065

<http://www.medicaltestingsolutions.com>