

### 1 Return Material Authorization Number

**Return Material Authorization Number:**

**Note**

You must know about all of the substances, which have been in contact with the instrument before you complete this declaration.

### 2 Identification of instrument

Instrument type: .....

Serial no.: .....

Was the instrument used, tested or operated?

Yes, go to Section 3

No, go to Section 4

### 3 Substance(s) in contact with instrument

Have any of the below mentioned substances been in contact with the above mentioned instrument:

- Radioactive  Yes  No
- Biological active  Yes  No
- Dangerous to human & safety?  Yes  No

If you have answered "No" to all of these questions, go to section 4.

<i>Substance name</i>	<i>Chemical symbol</i>	<i>Precautions required (i.e. use protective gloves, etc.)</i>	<i>Action required after human contact with substance</i>
1 .....			
2 .....			
3 .....			
4 .....			
5 .....			
6 .....			
7 .....			

Metrohm will not accept delivery of any instrument that is contaminated with radioactive substances, unless you provide proof of decontamination.  
 You must contact the Service department of your Metrohm representative before returning such an instrument.

## 4 Return information

Reason for return and symptoms of malfunction:

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.....  
.....  
.....  
.....  
.....  
.....

## 5 Customer details

Company:

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Name:

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Job title:

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Address:

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.....  
.....  
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Phone / Fax:

.....

E-mail:

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## 6 Returning address

Return the instrument in original packaging to your Metrohm representative.

Company:

.....

Address:

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.....  
.....  
.....

## 7 Confirmation

I have supplied accurate information in this declaration and have not withheld any information.

Customer signature:

.....

Date:

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