

Declaration of Decontamination

Repair Form

Please complete this form and attach to the product prior to shipping. Complete a separate form for each product returned to METTLER TOLEDO. **Failure to fully complete this form will result in repair delays, and equipment may be returned un-repaired at your expense.**

Part 1: Repair Information

Return Authorization Number:

Customer Information	
Company Name	
Contact Name	
Shipping Address	
City, State, Zip	
Phone	
Fax	
Email	

Name and Address for Certificate (if different)	
Company Name	
Address	
Room, Building	
City, State, Zip	

Product Information for Equipment Being Returned for Repair	
Model Number	Serial Number
Description of problem or error:	
List of accessories being returned:	

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METTLER TOLEDO

Part 2: Shipping Information

Return Shipping Instructions		
METTLER TOLEDO will ship your equipment via UPS and add the charge to your invoice.		
Ground	2 nd Day	Next Day (recommended for Microbalances)
If you prefer another method, please provide the carrier name and method, and your account number.		
Carrier	Method	Account Number

Part 3: Declaration of Decontamination

In order to ensure the adequate protection of our technicians, METTLER TOLEDO requires our customers to declare the types of substances that have been in contact with the product(s) you are returning for service/repair. **As part of the service agreement, you are responsible for the decontamination of your product prior to shipping.**

Has this equipment been used with dangerous, poisonous or radioactive materials?	
No	Yes
	If Yes , please specify type and attach additional pages if necessary:
Can this equipment be handled and disassembled without risk?	
No	Yes
	If No , please provide safe handling procedures and any personal safety equipment instructions which will be required

If you need assistance with decontamination instructions please consult the product manufacturer or METTLER TOLEDO technical service at 1-800-METTLER.

Part 3: Authorizing Signature

I, _____, certify that I am the equipment owner/I am authorized to act on behalf of the equipment owner, and have decontaminated the referenced unit and tested it for radiation level hazard and potential hazard(s) from bio-hazardous materials and/or chemicals.

Signature _____