

Please return this form together with the appliance to:

Megger Germany GmbH  
 Service department

Dr.-Herbert-lann-Str. 6

**D-96148 Baunach, Germany**

**Return form**

Please use one form per appliance and send to the above address!

Address for return shipment	Costs of repair to be billed to
Company :	
Department :	
Name :	
Street :	
Country / town zip code :	
<b>Your PO No.</b> :	

Your PO No.		
Name :	Department :	
Phone :	Fax :	
Email :		

Appliance details		
Name :	Serial no. :	
Date of purchase:	Guarantee :	<input type="checkbox"/> Yes <input type="checkbox"/> No
Accessories included :		

Further information	
Reason for returning	<input type="checkbox"/> Repair <input type="checkbox"/> Return <input type="checkbox"/> Inspection <input type="checkbox"/> Calibration* <input type="checkbox"/> _____
Estimate required?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In case of repair cost exceeding: €
Quotation for new equipment required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Permanent malfunction	Description of malfunction:
<input type="checkbox"/> Occasional malfunction	

\* Not possible with all models. Please enquire from your service contact.