



**EQUIPMENT REPAIR FORM**

**Make:** \_\_\_\_\_  
**Model:** \_\_\_\_\_  
**Serial #:** \_\_\_\_\_  
**Repair Estimate First?** (\$37.50 + shipping) \_\_\_\_\_

**Description of Equipment Problem:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Accessories Included:** \_\_\_\_\_

Please include all accessories normally used with the item.

Internal Use: \_\_\_\_\_  
Technician: \_\_\_\_\_  
Date Repaired: \_\_\_\_\_  
Date Returned: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Date: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Purchase Order #: \_\_\_\_\_  
Authorized Signature: \_\_\_\_\_

Please pack the repair and ship to:

**CRI Technologies**  
**Attn: Service and Repair**  
**7015 Sunset Strip Avenue N.W.**  
**North Canton, OH 44720**  
**P (330)244-5465 F (330)244-5467**



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