



**PROCESS & ANALYTICAL INSTRUMENTS DIVISION**

Fluid Analysis Business Unit

11 Commerce Boulevard, Middleboro, MA 02346 USA

Email us at [ma-mid.sales@ametek.com](mailto:ma-mid.sales@ametek.com)

Tel 508-946-6200 or 800-628-8139

[www.brookfieldengineering.com](http://www.brookfieldengineering.com)

## PROCESS REPAIR RETURN FORM

This form applies to all Process/ In-Line Instrumentation

**IMPORTANT:**

- BEFORE RETURNING YOUR INSTRUMENT, YOU MUST EMAIL OR CALL AMETEK BROOKFIELD FOR A RETURN AUTHORIZATION NUMBER! FAILURE TO DO SO MAY RESULT IN A LONGER REPAIR TIME!**
- There is a \$352.00 evaluation fee. This fee will be waived for instruments that receive service.
- A PDF or hard copy is required for all Purchase Orders** and must include the following information:
  - ☒ Issued in the name of: **AMETEK Brookfield**
  - ☒ Payment terms: **NET 30**; Freight terms: **FOB Middleboro, MA.**
  - ☒ **VALUE NOT TO EXCEED \$1,500.00** (this statement must be written on the PO)
- Ship your instrument to AMETEK Brookfield, 11 Commerce Blvd, Middleboro MA 02346 USA

**IMPORTANT:**

Please complete all applicable items and return this form with this unit for repair to AMETEK Brookfield at the address above.

### CONTACT/ USER INFORMATION

Primary Contact: \_\_\_\_\_ Date: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email: \_\_\_\_\_

**BILLING:**

Company: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

**SHIPPING:**

Company: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

### INSTRUMENT INFORMATION

Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Please describe all problems/ malfunctions:

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## MATERIAL INFORMATION

Material Measured: \_\_\_\_\_

Has this Unit for repair been exposed to Hazardous Materials? ☐ YES ☐ NO

If the instrument has been exposed to hazardous material, please decontaminate the unit and include the appropriate MSDS sheet.

Method of Decontamination: \_\_\_\_\_

Decontamination performed by: \_\_\_\_\_

## RETURN SHIPPING F.O.B. Middleboro, MA

FED EX: ☐ Ground ☐ Std. Overnight ☐ Priority Overnight ☐ 2nd Day

Fed Ex Account Number: \_\_\_\_\_

UPS\*\*: ☐ Ground ☐ Next Day ☐ 2nd Day ☐ Collect

\*\*Your account number is **required** for all UPS shipments: \_\_\_\_\_

**PLEASE ATTACH A COPY OF  
YOUR PURCHASE ORDER.**

Return Authorization Number:



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