



MJW Technical Services

MJW Technical Services, Inc.

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Calibration / Repair Order Form

Date: \_\_\_\_\_

Name on Cal Cert: \_\_\_\_\_

Location: \_\_\_\_\_

Billing Information:

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Service Requested:

Calibration Repair Other: \_\_\_\_\_

Contact Person: \_\_\_\_\_

(Tech / User)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Invoice to be sent via:

E-mail Fax Mail

Tax Exempt:

No Yes # \_\_\_\_\_

Payment via:

Credit Card Purchase Order # \_\_\_\_\_

Bill to Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ship to Address:

Same as Bill to Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Shipping Method:

UPS FedEx

Type of Service: \_\_\_\_\_

Use Customer Acct#: \_\_\_\_\_

Zip Code for Acct#: \_\_\_\_\_

Insurance: No

Yes Amount \_\_\_\_\_

Instruments / Probes / Cables

Table with 3 columns: Manufacturer, Model, Serial. Multiple empty rows for data entry.

Battery replacement as needed Yes No

Repairs approved up to \$ \_\_\_\_\_

Call w/repair estimate WO#: \_\_\_\_\_

Email repair estimate Surveyed By: \_\_\_\_\_

Special Instructions, malfunctioning symptoms, etc.

Large empty rectangular box for special instructions.