

Return to Manufacturer Authorization

Dear Customer,

In order to process your repair as soon as possible we request you to fill in this questionnaire and attach it to your shipment. Before sending, please inform your corresponding contact person at Eickemeyer by email. In return you will receive your RMA number.

Thank you for your cooperation! Your EICKEMEYER Service-Team.

Name | Address | Practice Stamp

RMA Number

Contact person

Direct phone number

Type of device*

Invoice no./Date

Serial number

Accessories (i. e. power pack, etc.)

Exact error description

Cost estimate required?

☐ yes☐ no

Important:

- All returned items must have been cleaned and if necessary disinfected.
- In case our cost estimate is not accepted a service fee of 50,- € minimum is due. This fee can be higher depending on the effort and device (e.g. surgery motors, etc.).
- Disassembled items will not be re-assembled for safety reasons.
- Repair shipments cannot be combined with standard shipments and will be sent separately.

Date

Signature

*please fill in a separate form for each item