



# PIPETTE ON-SITE REQUEST & QUESTIONNAIRE FORM

QUOTE # \_\_\_\_\_

## ON-SITE ADDRESS

Address: \_\_\_\_\_  
STE/Bldg: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

## PRIMARY ON-SITE CONTACT

Name: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

Yes, I would like to update my contact information to reflect the information above.  
No, I do not wish to update the contact information on file.

## BILLING ADDRESS

Company: \_\_\_\_\_  
Attention: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

## BILLING INFORMATION

PO Number: \_\_\_\_\_ PO  
Name: \_\_\_\_\_ MC  
CC #: \_\_\_\_\_ Visa  
Exp. Date: \_\_\_\_\_ Amex  
Telephone: \_\_\_\_\_ Call

## SPECIAL REQUESTS

Are there any special requests we should be aware of?

Repairs

Serial Number(s): \_\_\_\_\_

Preventative Maintenance/Full Tare

Replace Filters and/OR O-Rings

Other: \_\_\_\_\_

## ADDITIONAL DETAILS

**THIS SECTION MUST BE COMPLETED IN ORDER TO AVOID DELAYS IN SERVICE.**

**How many pipettes to be calibrated?**

Pipette, Aids \_\_\_\_\_

Pipette, Bottle-Top Dispensers \_\_\_\_\_

Diluters \_\_\_\_\_

Pipette, Multi-Channel (8/12) \_\_\_\_\_

Pipette, Multi-Channel (16) \_\_\_\_\_

Pipette, Single \_\_\_\_\_

Pipette, Repeaters \_\_\_\_\_

Are there any new pipettes to be calibrated? Yes No

Is the area a workable environment?

A sturdy workspace located in the lab

Access to power source near the workspace

**Parking:** Note: Paid parking will be charged back on the service form

On-Site Parking Location \_\_\_\_\_

Parking Pass Required

Location of Loading Dock \_\_\_\_\_

Comments: \_\_\_\_\_

## SERVICE LEVEL

The service selected below will be preformed on all equipment listed under 'Equipment Detail' & updated in your client portfolio.

### SAME AS PREVIOUS SERVICE\*

\*If selected leave the rest of the "Service Level" section blank\*

### ISO/IEC 17025 2017:

As Left

As Found Left

2x5 Measurements

3x5 Measurements

3x5 Measurements **Includes full measurement data on every channel.**

3x10 Measurements **Includes full measurement data on every channel.**

Other: \_\_\_\_\_

**Multichannel includes Leak Test & Single Volume Nosecone check only unless specified.**

### Tolerances

Scientific Calibration

Manufacturer

Other \_\_\_\_\_

**If tolerances are not specified, standard tolerances appropriate to the service level requested will be selected.**

## DUE DATE FORMAT

mm/yyyy

mm/dd/yy

mm/dd/yyyy

ddMMMyy

ddMMMyyyy

## SERVICE INTERVAL

3 Months

6 Months

12 Months

## TERMS

**AS FOUND** - Measurement data recorded prior to repair or adjustment.

**AS LEFT** - Measurement data recorded after repair or adjustment.

**ISO 17025** - Records temperature and humidity.

**TOLERANCE** - The inaccuracy and imprecision of the pipette.

**PREVENTATIVE MAINTENANCE** - External and internal inspection for functionality and condition.

\*Pipettes that need repair are subject to an evaluation fee. Pipettes received without being decontaminated are subject to a decontamination fee. Any pipette that arrives disassembled will be subject to a \$60/per pipette re-assembly fee.\*