

Service and Repair Return Form



Thank you for returning your instrumentation for service and repair.

Upon receipt of the below requested information and your instrumentation, we will conduct an initial evaluation and confirm the service/repair requirements. This process could take anywhere from a few days to several weeks depending on the complexity of your requirements and any tests we may need to carry out. Your Sales contact is on hand to assist at all times while your instrumentation is in our care.

To be pre-filled by Sales:	
Company Name	
Your Reference	

To be pre-filled by Sales:		
Model/Part Number	Serial Number	Reason For Return

Delta Mobrey Limited

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In case of return for fault (mandatory for products supplied with SIL Certificate):	
• How long has the product been in operation before the fault occurred?	
• Please describe the application?	
• Describe the method of calibration check used, if applicable	
Description of operating Condition covering below:	
• Process Media	
• Set-point/ Set range	
• Maximum & Normal operating Pressure or Temperature conditions	
• Ambient temperature (range)	
• Are photographs or videos showing the issue available?	
• Process Media	
Set-point/ Set range	
• Electrical parameters Supply Voltage & type of load (resistive or inductive for switches)	
• Any other information	

Specific mandatory information for products supplied with SIL Certificate:	
• Did the instrument failed to prevent a Hazardous Incident? Please give details	
• When was the last Proof Test performed? Following the procedures shown on our Safety Instruction or other?	

To be completed by Delta Mobrey staff (for internal use only):	
Delta Reference:	SQ
Customer Account Code:	
Date Instrument(s) Received:	
Date Cleanliness Certificate Received:	
Any noticeable damage to the packaging or instrument(s) on arrival? (If 'yes' - take photographs and store in S&R folder)	

Certificate of Cleanliness

Important: We require the Certificate of Cleanliness to be completed and signed before your return can be investigated.

Please ensure the completed Certificate of Cleanliness is attached to the outside of the packaging the instrument is being returned in.

Has this equipment been exposed internally or externally to substances hazardous to health e.g. Toxic, Harmful/Irritant, Corrosive, Flammable?

Solids Liquids Gases Vapours Radiation None

- Please provide details of the installation and operating conditions:

- Please provide details of any contamination:

- Please provide details of decontamination:

- Please provide details of decontamination process from radiation
 - Detail of Testing device and detecting method used to measure the residual radiation on the moving parts in contact with the fluid, the parts of the connection and internal electronic board and mounting accessories.
 - Detail the radioactive isotope that the instrument has come into contact with
 - Detail of radiation level showing proof of the measurement (certificate generated by the testing device or a picture if the display during the measurement)

- Are there likely to be areas of residual contamination?
If yes, please provide special handling instructions or state handling precautions below:

To the best of my knowledge and belief I certify that the returned equipment is free from any residues in dangerous quantities.

Signature

Name printed

Department

Telephone No.

Date

Note: For signature, once document is filled out, save as pdf, and sign.