



Rebuild & Repair Form

To expedite your repair or rebuild please use this form:

- Please complete this form when sending in equipment, parts or valve blocks for service, repair or rebuild.
- Please complete one of these forms for each unit that you are sending in.
- Terms are Net 30 days OAC. All Major Credit Cards are also accepted.

Ship To: Biolytic Lab Performance, Inc.
 Att: Depot Repair Center
 5437 Central Ave, Suite 5
 Newark, CA 94560

Phone: 510-795-1142
 Fax: 510-795-1149

Instrument Model #: _____ Serial #: _____

List all Accessories that you have included: _____

Describe the Symptoms or the Problems you want Fixed. Also please provide any useful comments that will assist us in understanding the problems you want fixed or the requests that you have:

Please provide your company information below:

Billing Information

Company Name: _____
 Address: _____
 City: _____
 State / Province & Postal Code: _____

Shipping Information:

Contact Name: _____
 Phone #: _____
 Fax #: _____
 Attention: _____
 Email: _____

: _____
 : _____
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 : _____
 : _____
 : _____
 : _____
 : _____

>>>Required Information for Billing<<<

PO# _____
 Credit Card Information: (Type of card, circle one)
 Name on the Card: _____
 Expiration Date: _____

Maximum Authorized: _____
 Visa M/C AMEX Discover
 Card #: _____

Preferred Shipping Method: (please circle one)

Ground 2nd Day Standard Overnight Overnight AM

Ship on your account: Shipper: _____ Account #: _____