



# Clausen

INSTRUMENT COMPANY, INC.

## Repair Request Form

Please complete the form below with the required information.  
Please include a copy of the completed form with your instrument when returning for repair.

Please send your instrument to the following address:

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**Clausen Instrument Co.**  
**3018 US Highway 70 STE 6**  
**Black Mountain, NC 28711**  
**(828) 686.4433**  
**(828) 357.9200 (Fax)**

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

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_

Office Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Estimate: Yes\_\_\_ No\_\_\_

Detail description of problem with instrument:

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**Please include a Calibration Certificate, (\$45 charge)**

(All instruments that are repaired will have a calibration sticker placed on the instrument unless you request otherwise.)