

# PIPETTE SERVICE FORM



**LAB PEOPLE, INC.**



**THE SCALE PEOPLE, INC.**

## Select Service Method

**Mail-In**

**On-Site**

## Contact/Billing Information

### Pipette Service Contact

### Billing Contact

Name:

Name:

Email:

Email:

Telephone:

Telephone:

Email Calibration Certificates

Billing Address:

## Select Payment Method

Purchase Order

Credit Card

## Mail-In Shipping Address

The Scale People  
9693 Gerwig Lane, Suite C | Columbia, MD 21046

### Return Shipment Address

### On-Site Service Address

### Shipping Information

UPS (Our preferred method)

Shipping Account #

### Additional Notes for On-Site Service

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Frequency of Service			
Monthly	3 Months	6 Months	12 Months
Next Calibration Due Date			

Tolerances		
Standard	Manufacturers	Custom

Calibration Service & Documentation	
Calibration Summary Report	<i>Summary Report with Pass / Fail Indication</i>
ISO/IEC 17025 Calibration Certificate	<i>As Found &amp; As Calibrated Data (includes ISO/TEC calibration certificate for each pipette)</i>

Calibration Service & Documentation	
Single Channel Pipette	<p><i>After receipt of this Service Form you will be emailed a Quote</i></p> <p><b>Service will be scheduled after we receive confirmation via Email OR a Purchase Order OR Credit Card</b></p>
Eight (8) Channel Pipette	
Twelve (12) Channel Pipette	
Sixteen (16) Channel Pipette	
Repeater	
Bottle-Top Dispenser	

Decontamination Statement				
ETO	Biocides	Autoclave	Irradiation	Other

I certify that all equipment are free from any radioactive, bio-hazardous, or otherwise dangerous substances/gases and are safe for human handling

Printed Name

Date

Signature

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