



Service No.

*This field is filled in by the Althen Service Department.*

**IMPORTANT INFORMATION IN ADVANCE**

Please fill and print out the form, sign it and enclose it with your goods. Please send the goods to:

Althen Sensors & Controls BV  
Incoming goods  
Verrijn Stuartlaan 40  
2288 EL Rijswijk  
The Netherlands

**Product Details**

Product Name

Product Name 1

Product Name 2

Product Name 3

Serial No.

Serial No. 1

Serial No. 2

Serial No. 3

Current value of goods (in EUR) €\*

EUR

Service

Calibration  Repair  Provision  Other

REASON FOR RETURN / ERROR  
DESCRIPTION

*Describing the error as detailed as possible will shorten the processing time.*

Contact person for technical  
queries:

Name

Phone

Email

*The inspection costs per product are charged in accordance with the applicable service and repair conditions.*

Order/Ref. No.:

*This field is filled in by the Althen Service Department.*

VAT ID No.

*This field is filled in by the Althen Service Department.*

Billing and delivery address -  
Name

First Name

Last Name

Department

Company Name

Street & Street No.

Postcode

City, Country

**Only to be filled out if the delivery address is different**

VAT ID No.

*This field is filled in by the Althen Service Department.*

Billing and Delivery Address -  
Address

Department

Company Name

Street & Street No.

Postcode

City, Country

Date of return

dd-MMM-yyyy

*dd.MM.yyyy Please indicate the date on which you are shipping the products to us.*

For all returned goods, we confirm that they are free of microbiological, chemical, toxic and other hazardous substances. With our signature we acknowledge the service and repair conditions.

<https://www.althensensors.com/services/repairs>

Location, Date

Signature