

Complete with your contact details and photocopy this form as many times as you require. Fill out with your GC equipment details & contract requirements and send to us. We will provide you with a detailed quote for your servicing & support requirements. Feel free to phone or e-mail us if you have difficulties collating the information, we will happily visit & collate the information for you.

<b>Name:</b>	<b>Phone No:</b>
<b>Company:</b>	<b>Extension:</b>
<b>Address:</b>	<b>E-mail:</b>

<b>GC Information</b> Your Reference (ie GC1)	<b>Contract requirements:</b> Service Support <input type="checkbox"/> Gold Service Support <input type="checkbox"/> Gold Plus Service Support <input type="checkbox"/> Customised <input type="checkbox"/>
--------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>Calibration / Qualification after repair or preventative maintenance?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Number of preventative maintenance visits per year</b> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> other .....
---------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------

Module	Type	Manufacturer	Model
Autosampler			
Injection port 1			
Injection port 2			
Oven/Mainframe			
Detector 1			
Detector 2			
Other Modules / information please detail below			