

Service request intake form

Form SR-1, two pages

COMPLETE BOTH PAGES. ONE UNIT PER FORM.

PARTNER / ORGANIZATION

LOCATION NAME OR ID

DATE AND TIME REPORTED

1 THE UNIT

From the plate on the back of the instrument

SERIAL NUMBER (MB-, MP-, OR MF-)

MODEL ☐ Meridian Bench ☐ Meridian Pro ☐ Field Kit

APEX ORDER NO. OR PURCHASE DATE

ASSET TAG (IF ANY)

PLAN ☐ None ☐ Atlas Care

☐ Care Plus

2 WHO TO CONTACT

Whoever the technician should call first

REQUESTER NAME

ROLE

PHONE

EMAIL

ON-SITE CONTACT (IF DIFFERENT) AND PHONE

3 THE ISSUE

Tick every symptom that applies

- | | | |
|---|---|--|
| ☐ Will not power on | ☐ Powers on, then shuts off | ☐ Error code on display |
| ☐ Readings drift or will not settle | ☐ Readings differ from reference | ☐ Fails self-test |
| ☐ Unusual noise or vibration | ☐ Overheating or smell | ☐ Display blank or unreadable |
| ☐ Probe damaged or not detected | ☐ Network or sync failure | ☐ Physical damage (drop, spill) |
| ☐ Battery will not hold charge (Field Kit) | ☐ Calibration due or overdue | ☐ Other (describe below) |

ERROR CODE SHOWN, IF ANY

WHEN IT STARTED (DATE, TIME)

DESCRIBE WHAT HAPPENED, WHAT YOU WERE DOING, AND ANYTHING YOU TRIED

IS THE UNIT ☐ Still in use ☐ Taken out of service ☐ Powered off and isolated

4 URGENCY

Pick one

☐ **Low**

Unit works. Fault is cosmetic, intermittent, or a planned calibration. Response within 1 business day.

☐ **Unit down**

Unit cannot be used for its purpose. Response within 1 business hour, loaner offered on Care Plus.

☐ **Safety**

Smoke, heat, exposed wiring, or any risk to a person. Isolate the unit and call (555) 010-0100, option 2, as well.

Service request intake form, continued

WRITE THE SERIAL NUMBER AGAIN HERE

5 LOANER UNIT

Atlas Care Plus accounts only

LOANER REQUESTED ☐ Yes, ship a loaner next business day ☐ No, we can wait for the repair

A loaner is a matching Meridian model on a 30-day term, extended automatically while the repair is open. Accounts without Care Plus can ask the service desk about a paid loaner at \$89 per week.

SHIP LOANER TO (LOCATION OR ADDRESS)

RECEIVING CONTACT AND PHONE

LOANER CONFIGURATION ☐ Same as the unit above ☐ 120 V ☐ 230 V ☐ Rack mount ☐ Extended probe

6 RETURN SHIPPING

How the unit gets to our lab

☐ Send a prepaid label

We email a label within 1 business hour. Default for all accounts.

☐ We will ship on our own carrier

Ship to 400 Meridian Way, Suite 200, Tampa, FL 33602. Write the SR number on the box.

PICKUP ADDRESS (IF NOT THE LOCATION ABOVE)

PICKUP WINDOW AND DOCK NOTES

PACKING CHECKLIST, TICK BEFORE SEALING

☐ Original case or a double-walled box with 2 inches of padding on every side

☐ Probes detached and wrapped separately

☐ Power cord and any adapters included

☐ Field Kit battery removed and packed in its sleeve

☐ Copy of this form inside the box

☐ SR number written on the outside of the box

7 SITE ACCESS

For on-site visits under Atlas Care Plus

☐ Badge or escort required ☐ Health screening required ☐ Parking or dock instructions below ☐ No special requirements

8 AUTHORIZATION

By signing, the requester confirms the unit may be diagnosed and repaired under the partner agreement, and that any repair outside warranty or plan coverage will be quoted before work begins.

NAME (PRINT)

SIGNATURE

DATE

FAX
(555) 010-0190
Both pages

EMAIL A SCAN
service@apexinstruments.example
PDF or photo, both pages

OR SUBMIT ONLINE
apexinstruments.example/portal
Service, New request. Fastest route.

OFFICE USE ONLY RECEIVED SR NUMBER URGENCY SET LOANER SENT TECH ASSIGNED