

RETURN FORM with safety certificate¹⁾



Submission / reason		
Repair / complaint	<input type="checkbox"/>	Maintenance
		<input type="checkbox"/>
		Return shipment
		<input type="checkbox"/>

A.KRÜSS Optronic GmbH
 Alsterdorfer Straße 276–278
 22297 Hamburg
 GERMANY

Company / division: _____
 Contact person: _____
 Address: _____
 Telephone no.: _____
 Email address: _____
 Unit type: _____
 Serial number: _____

Problem information

Problem specification already communicated to ²⁾	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
At (name A.KRÜSS – contact):	Date:
Error description / problem specification of the user (mechanic / electronic / optic/ measurements / software / other) Eg. error evaluation: What? Where? When? Circumstances? How is it demonstrated and how does it appear?	

²⁾Contact for giving problem information: Service phone number +49 40 51431-0 / Email address: info@kruess.com

User administration

- ➔ For devices with an active user administration please indicate a valid administrator-login (via phone / Email). Alternatively, specify a contact person (name / contact details) who has information about the current administrator login.

User administration login / contact person
Name:
Contact:

Data backup

- ➔ For devices with active data storage, a necessary update can lead to loss of data or unit settings. Please always make sure that your data has been already backed up.

Data backup was carried	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
Name:	Date:

¹⁾ Please note: Our service team can only repair or maintain your device upon receipt the completed filled in return form. Shipments without this document cannot be processed for security reasons and will be returned to the sender at a charge.

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Declaration of decontamination



The **GefStoffV** comprehensively regulates the protective measures for employees who are involved in handling hazardous substances. The ordinance obliges hazardous substances to be classified and labelled according to their hazardous properties. To relieve you as a customer and to protect our employees, please make sure that the following declaration of decontamination is filled out carefully. If necessary, enclose the respective safety data sheets.

Measured samples (the device was in contact with the following substances)	
<input type="checkbox"/>	Radioactive substances ³⁾ _____
<input type="checkbox"/>	Toxic substances _____
<input type="checkbox"/>	Carcinogenic substances _____
<input type="checkbox"/>	Infectious material ³⁾ _____
<input type="checkbox"/>	Biological material _____
<input type="checkbox"/>	Other dangerous material _____

³⁾ If devices have come into contact with one of these substances, the devices will only be accepted if a consultation with A.KRÜSS has taken place prior to submission.

Cleaning agent used (the device was cleaned and decontaminated with the following substances in the concentration indicated and according to the following procedure.)		
Concentration %	Cleaning agents	Cleaning procedure
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		

Customer declaration

We confirm that the device has been cleaned before shipping and all sample remains have been removed. The device was professionally decontaminated. We declare that the information given above is complete and correct.

Date / place	Signature
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Privacy policy: Your personal data will be processed by us depending on the reason for your or our contact. Further information can be found [here](#).

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