



* EMAIL ADDRESS: _____

*Required field. Valid email must be provided for order verification and tracking purposes.

REPAIR DESCRIPTION FORM

DATE: _____

CONTACT	COMPANY NAME:		CONTACT NAME:		
	MAIL ADDRESS:	STREET:	CITY:	STATE:	ZIP:

BILL TO	COMPANY NAME:		PURCHASE ORDER NUMBER:		PHONE:	FAX:
	MAIL ADDRESS:	STREET:	CITY:	STATE:	ZIP:	

SHIP TO <small>(if different)</small>	COMPANY NAME:		ATTENTION/TAG #:		PHONE:	FAX:
	MAIL ADDRESS:	STREET:	CITY:	STATE:	ZIP:	

ITEM #1	MANUFACTURER:	MODEL NUMBER:	DESCRIPTION:	APPROVAL METHOD: <input type="checkbox"/> Preapproved: S <input type="checkbox"/> Quote Before Approval
	SERIES:	SERIAL NUMBER/LOT CODE:	QUANTITY:	RETURN VIA:
	REPAIR DESCRIPTION/COMMENTS:			REPAIR SERVICE REQUESTED: <input type="checkbox"/> Standard (10-14 business days) <input type="checkbox"/> Rush (5 business days, +10%, \$100 min.) <input type="checkbox"/> Emergency (48 hours, +25%, \$250 min)

ITEM #2	MANUFACTURER:	MODEL NUMBER:	DESCRIPTION:	APPROVAL METHOD: <input type="checkbox"/> Preapproved: S <input type="checkbox"/> Quote Before Approval
	SERIES:	SERIAL NUMBER/LOT CODE:	QUANTITY:	RETURN VIA:
	REPAIR DESCRIPTION/COMMENTS:			REPAIR SERVICE REQUESTED: <input type="checkbox"/> Standard (10-14 business days) <input type="checkbox"/> Rush (5 business days, +10%, \$100 min.) <input type="checkbox"/> Emergency (48 hours, +25%, \$250 min)

ITEM #3	MANUFACTURER:	MODEL NUMBER:	DESCRIPTION:	APPROVAL METHOD: <input type="checkbox"/> Preapproved: S <input type="checkbox"/> Quote Before Approval
	SERIES:	SERIAL NUMBER/LOT CODE:	QUANTITY:	RETURN VIA:
	REPAIR DESCRIPTION/COMMENTS:			REPAIR SERVICE REQUESTED: <input type="checkbox"/> Standard (10-14 business days) <input type="checkbox"/> Rush (5 business days, +10%, \$100 min.) <input type="checkbox"/> Emergency (48 hours, +25%, \$250 min)

ITEM #4	MANUFACTURER:	MODEL NUMBER:	DESCRIPTION:	APPROVAL METHOD: <input type="checkbox"/> Preapproved: S <input type="checkbox"/> Quote Before Approval
	SERIES:	SERIAL NUMBER/LOT CODE:	QUANTITY:	RETURN VIA:
	REPAIR DESCRIPTION/COMMENTS:			REPAIR SERVICE REQUESTED: <input type="checkbox"/> Standard (10-14 business days) <input type="checkbox"/> Rush (5 business days, +10%, \$100 min.) <input type="checkbox"/> Emergency (48 hours, +25%, \$250 min)

Send your parts to:
 Innovative-IDM Repair Depot
 13770 Hollister Road, Ste. 100
 Houston, Texas 77086

☎ Toll Free Customer Service
800.237.3278
 Email: repairs@innidm.com
www.innovativeidm.com

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 Superior Performance
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CUSTOMER SIGNATURE: <small>(required for preapproval)</small>	DATE:
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