



Returns to the manufacturer

Complete and comprehensive information concerning the matter is required in order to ensure that all returns of equipment, spare parts or accessories are processed quickly and efficiently.

Procedure:



Download of forms

The forms can be downloaded online at www.martinchrist.de \rightarrow [Service] \rightarrow [Overhaul, repair and leak testing] or www.sigma-zentrifugen.de \rightarrow [Service] \rightarrow [Overhaul and repair]



Completion of the declaration of decontamination

Due to the legal regulations for the protection of our employees and the environment, we are obliged to document the harmlessness of all incoming goods.

- The form must be filled in completely as well as signed by authorised and specialised personnel.
- Affix the original document in a clearly visible manner to the outside of the packaging.



We will return the part/unit at your expense if no declaration of decontamination is provided.



Completion of the return declaration

Product-specific data are required to ensure that the return can be processed without delay.

- Enclose the completed return declaration form, including a detailed error description, with the defective part/unit.
- If several parts are returned together in one packaging, please enclose a separate form for every defective part.



We will return the part/unit at your expense if no error description is provided.



Option: Pick-up order (only within Germany)

Upon request, we will commission a forwarding agent to collect the unit

 Complete the pick-up order and send it to support.lab@martinchrist.de or support.lab@sigma-zentrifugen.de



Returning a product

- Package the part/unit safely for transport, and in its original packaging, if possible. The original packaging can be supplied by the manufacturer for a fee.
- Return the product with the completed forms to

Martin Christ Gefriertrocknungsanlagen GmbH or Sigma Laborzentrifugen GmbH Service Laborgeräte An der Unteren Söse 50 37520 Osterode Germany



If the part/unit is sent to the manufacturer in unsuitable packaging, it will be repackaged for return at your expense.





Declaration of decontamination form

This declaration must be filled in and signed by authorised and specialised personnel only. Please complete this in block letters! Fields marked with * are mandatory.

*This concerns	Martin Christ (igsanlagen G	ınlagen GmbH Sigma Laborzentrifugen GmbH			imbH		
Customer order no.			Service t	Service ticket no.				
*Type of device		*Serial no	*Serial no.		*Year Nor		minal voltage V	
*Reason for returning the product		Repair/ma	Repair/maintenance		Disposal Oth			
*Accessories (typ	e, order no., batch	no., etc.)						
*Error description	or other informati	on						
*General characte	ristics of the subs	tances						
Caustic Toxic		Corrosive			Other (harmful to health, irritant, oxidising, etc.)			
Explosive	Explosive Biologically hazardous		Radioactive		Harmles	Harmless to health		
In combination with which substances can hazardous mixtures develop?								
Trade name/chemi	cal formula:							
*Have the components been cleaned before shipment?				YES	NO			
*Is the equipment properly decontaminated and not harmful to human health? YES NO							NO	
*If not, with which substances has the equipment come into contact?								
Trade name/chemical formula:								
Remarks (e.g. wear personal protective equipment):								
Legally binding	declaration							
We hereby declare am able to properly information vis-à-vi third parties. We kr	that the information assess this. We know the contractor and now that – regardles the personnel of the	ow that we are I we commit ou s of this declara	liable for da rselves to ind ation – we ar	mage resul demnify the e directly li	ting from incomple contractor from able vis-à-vis thir	ete or incorred any damage c d parties and i	ct laims by in	
*Company/institute								
*Name of responsible person								
*Position of responsible person								
*Street								
*Postcode, city								
*E-mail								
*Phone								
*Date								
*Signature		Stam	p					





Return form

Return of a device or accessory to

Martin Christ Gefriertrocknungsanlagen GmbH Sigma Laborzentrifugen GmbH

Please complete this in block letters! Fields marked with * are mandatory.

Please enclose a separate problem description for every device or accessory!

*Type of device	*Serial no).	*Year					
*Reason for returning the product	Repair/mainten	ance Disposal	Other:					
*Accessories (type, order no., batch no., etc.)								
*Problem description								
Standard settings during the operation of the unit (if known):								
Please send us a cost estimate against a charge. Upon request, we will prepare and submit to you a cost estimate prior to performing the repair. Please confirm such cost estimate within 14 days. If the cost estimate has still not been confirmed after 4 weeks, we will return the device. Please note that you must bear the incurred costs.								
*Company/institute								
*Name of responsible person								
*Street								
*Postcode, city								
*E-mail								
*Phone								
*Date *Signature		Stamp						
Olynature		Glamp						