



Instrument Return Form

Please complete this form and return with your Earscan® Audiometer.

If you are returning your Earscan for repair, or have any questions, please call us at **(866) 327-7226**. We may be able to solve a problem during a phone call or have your local dealer assist you.

We service and calibrate instruments in the order they are received. We do not provide "loaner" equipment.

You must return your Earscan **and** matching headset. The Earscan serial number appears on a white label on the edge of each headphone. It is **not** necessary to send the carrying case, AC adapter, patient response button, batteries, or extra cables.

Ship to: MICRO AUDIOMETRICS CORP.
1901 MASON AVE, STE 104
DAYTONA BEACH, FL 32117-5105

Earscan Serial Number _____ Model _____
____ Annual Calibration (or) ____ Exhaustive Calibration (required every 2 years for OSHA compliance only)
____ Operational Problem (describe) _____

Company Name _____

Contact Name _____ Email _____

Phone (____) _____ Ext _____

Shipping Address _____

City _____ State _____ Zip Code _____

We will return equipment to you via UPS Ground unless otherwise requested.
Return shipping charges will be prepaid and added to your invoice.

Billing Address _____

City _____ State _____ Zip Code _____

**Purchase Order _____ (please include copy) or we will contact you for
Credit Card information prior to returning your instrument.**