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Sherwin Industries, Inc.

Airport Runway Support

AUTHORIZATION TO PROCEED WITH CALIBRATION FORM

DATE		SERIAL NUMBER:		<input type="checkbox"/> CALIBRATION AND RECERTIFICATION	
				<input type="checkbox"/> REPAIR REQUIRED	
CONTACT PERSON			EMAIL ADDRESS:		
PHONE NUMBER:			PURCHASE ORDER: (IF REQD)		
FAX NUMBER:			CREDIT CARD NO.		
			EXPIRATION DATE		
			V# (3 DIGIT CODE ON BACK OF CARD)		
BILLING ADDRESS:			RETURN SHIPPING ADDRESS:		

This form must be filled out and sent to Sherwin Industries, Inc. prior to the calibration.

Once the form is returned to Sherwin Industries, Inc. please send your units into Effective Solutions no additional information or return number is required.

If the purchase is going to be paid using a credit card please indicate so on the form above. Sherwin Industries, Inc. will run the credit card once the unit has been calibrated and the return freight is known.

If there are any questions or the unit requires repair please describe the problem that is being experienced below or on additional sheets if required. If the unit requires that the unit be sent back to the United Kingdom we will provide an estimate of necessary repairs: