

# Miller-Weber of Texas Calibration Laboratory

## CALIBRATION LABORATORY ORDER FORM

(Please fill in all shaded portions of this form. Thank You!)

CUSTOMER INFORMATION		Date:
Bill To:		Contact:
		Phone:
		Fax:
		Email:
Ship To:		Unless otherwise instructed, we shall use the Company name and address shown in the "Ship to" section of this form as the Customer Information on the Report of Calibration. If you wish us to use different Customer Information, please indicate so under "Special Instructions" on Page 2 of this form

INSTRUMENT INFORMATION									
Please check the appropriate boxes and fill in all of the requested information. Check "AS ON LAST REPORT" if you wish us to re-calibrate the instrument as previously reported. The "STANDARD" points are those found in ASTM E1 for ASTM thermometers and those recommended by NIST for non-ASTM Thermometers (every 100 lines over the entire range. "STANDARD" for hydrometers is 3 points over the range of the hydrometer (low, middle & high on the scale). If you have specific points you need calibrated on either your thermometer or hydrometer, check the "SPECIFIED BY CLIENT" and write down the points you want. As always, our customer service representatives can assist you with this task. <i>IF YOU CHOOSE "AS ON LAST REPORT" OR "STANDARD", YOU DO NOT NEED TO FILL IN TEMPERATURE OR DENSITY POINTS TO BE CALIBRATED.</i>									
SERIAL #:		POINTS TO BE CALIBRATED:	<input type="checkbox"/>	AS ON LAST REPORT	<input type="checkbox"/>	STANDARD	<input type="checkbox"/>	SPECIFIED BY CLIENT:	
SERIAL #:		POINTS TO BE CALIBRATED:	<input type="checkbox"/>	AS ON LAST REPORT	<input type="checkbox"/>	STANDARD	<input type="checkbox"/>	SPECIFIED BY CLIENT:	
SERIAL #:		POINTS TO BE CALIBRATED:	<input type="checkbox"/>	AS ON LAST REPORT	<input type="checkbox"/>	STANDARD	<input type="checkbox"/>	SPECIFIED BY CLIENT:	
RECALIBRATION INTERVAL:		(If you do not specify, we will default to a one year calibration interval)							

HOW WOULD YOU LIKE US TO SHIP THIS BACK TO YOU?	
<b>Please note: UPS is our preferred method of shipping. We ship daily directly from our facility. If you do not have a UPS Shipper Number, we will prepay and add shipping charges to your invoice.</b>	
<input type="checkbox"/> <b>UPS Ground</b>	Any instrument can ship to you via this shipping method.
<input type="checkbox"/> <b>UPS Next Day Air</b>	Any instrument <b>except</b> those containing mercury. <u>Please circle one:</u> Early AM Next Day Air Next Day Saver
<input type="checkbox"/> <b>UPS 2<sup>nd</sup> Day Air</b>	Any instrument <b>except</b> those containing mercury. <u>Please circle one:</u> Early AM 2 <sup>nd</sup> Day Air
UPS SHIPPER NUMBER:	
<input type="checkbox"/> <b>OTHER</b>	Please specify:

**CALIBRATION LABORATORY ORDER FORM**

<b>PAYMENT OPTIONS</b>			
<input type="checkbox"/>	VISA/ MASTERCARD/AMERICAN EXPRESS	Credit Card Number: _____	
Name on Card: _____	Street Number of PO Box # of CC Billing Address: _____	Expiration Date: _____	Security Code: _____ Zip Code of CC Billing Address: _____
<input type="checkbox"/>	UPS COD Person to be notified of COD amount on Day of Shipment: _____		
<input type="checkbox"/>	PREPAY If prepaying by check, please add \$22.00 shipping and handling fee if requesting prepaid UPS Ground		
Calibration charge: _____	+ \$22.00 = (total) _____	<b>TX Customers must also add appropriate Sales Tax.</b>	
<b>TX CUSTOMERS ONLY- IF THIS CALIBRATION IS TAX EXEMPT, PLEASE PROVIDE APPROPRIATE TAX EXEMPT CERTIFICATE</b>			

<b>SPECIAL INSTRUCTIONS TO OUR CALIBRATION LABORATORY</b>

**IMPORTANT: If you are shipping instruments to us, pack them in a carton 6" longer than the instruments and use 4" of dense loose fill completely around. DO NOT USE SHIPPING TUBES, FLAT BOXES OR ENVELOPES! Please insure the instruments for their full replacement value. Please contact our customer service representatives if you need assistance in shipping your instruments. PLEASE SEND THIS FORM AND A COPY OF YOUR MOST RECENT CERTIFICATE WITH THE INSTRUMENTS.**

We have enclosed a shipping label for your convenience.

From: _____ _____ _____ _____	<p><b>Ship to:</b></p> <p><b>MILLER-WEBER OF TEXAS</b></p> <p><b>6952 LAWNSDALE STREET</b></p> <p><b>HOUSTON, TEXAS 77023</b></p> <p><b>ATTN: CALIBRATION LABORATORY</b></p>
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