



Guideline Geo Repair Authorization Form
THIS FORM MUST BE PACKED WITH EQUIPMENT (PACK WITH CARE AND INSURE)

Guideline Geo, Inc.
1270 Drop Off Drive, Unit B
Summerville SC 29486
Office: 843-606-9923

Date ____/____/____

Contact Name: _____

Contact Email: _____

Contact Phone Number: _____

Company Name: _____

Shipping Address(If billing is a different address please provide both)

<https://americas.guidelinegeo.com>

Please Check:

- ____ Need Detailed Estimate
- ____ Call First
- ____ Already Spoken with Tech

ONE HOUR OF LABOR MINIMUM
\$145/Hour

Return Shipping Must Be Specified:

Your equipment will be returned via FedEx Ground unless specified on this return authorization form.

1 Day ____ 2 Day ____ Ground ____ Other ____

FedEx Account # (if applicable): _____

There is a \$25 Handling Fee

Equipment To Be Repaired:

SN: _____ Model: _____ Version: ____ Description of Problem: _____

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Repair Information (Mala Internal Only):

Labor Hours: _____ HR ____/____/____

Parts Required for Repair:

Quantity _____ Part Number _____ Description _____

Quantity _____ Part Number _____ Description _____

Quantity _____ Part Number _____ Description _____

Quantity _____ Part Number _____ Description _____

Repair Notes: _____

MALA GEOSCIENCE IS NOT RESPONSIBLE FOR EQUIPMENT DAMAGED IN SHIPPING