

# CODE Handpiece Repair Form

Please quote

Please repair

Practice name:

Address:

Postcode:

Telephone number:

Email:

Contact name:

Position:

Handpiece make:

Serial number:

Description of problem:

Handpiece make:

Serial number:

Description of problem:

Handpiece make:

Serial number:

Description of problem:

If the bearings can be replaced please use: Steel bearing  (3 month warranty)

Ceramic bearing  (6 month warranty)

If a bearing cannot be replaced a new cartridge will be fitted.

Please repair the low speed handpiece/s

## Decontamination certificate

I confirm that all the handpiece/s contained within this package have been sterilized according to the manufacturer's instructions

Print name:

Position:

Signature:

Date:

**Please send handpieces in individual view pouches, in a padded Jiffy Bag**

**! IMPORTANT:** It is illegal to send contaminated items via the postal service

Please enclose this repair form in the Jiffy Bag

Address label

FREEPOST RTUG-RXUJ-KSBZ  
CODE Handpiece Repair,  
BroomeHill,  
22 Fairmile Avenue,  
COBHAM,  
KT11 2JB