



**Equipment Repair Form**

Bio-Medical Equipment Service Co.  
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Federal ID #61-1170035  
Date:

Please follow these steps to complete the form. This will speed up the repair of your equipment. We do not require RA #s for incoming repair orders.

**STEP 1**

Your PO#

**STEP 2**

Facility Name

Shipping Address

City

State

ZIP

Billing Name

Billing Address

City

State

ZIP

Contact Name

Phone Number

ext.

email

Eqpt. Manufacturer

Model #

Serial #

Channel #

Failure

Eqpt. Manufacturer

Model #

Serial #

Channel #

Failure

Eqpt. Manufacturer

Model #

Serial #

Channel #

Failure

**Comments**

**STEP 3**

Shipment Method

Please print a copy of this document for your records and include a copy of this form when you ship your product(s) to BMES.