

**E-mail: info@2mag.de**

**Return**

**2mag AG  
Schragenhofstraße 35 I-K  
80992 Munich  
GERMANY**

Company	
Address	
Zip code/City/Country	
Contact person	
Phone	
E-mail	
Model	<b>Please fill in one form per unit!</b>
Order number	Serial number

**For our employees` safety (occupational health and safety, Section 5 of the Biological Materials Regulation), please pay regard to the following measures:**

- Packing Requirements**
-  Please use this form exclusively to return a unit or parts of one.
  -  First send the completed form to our e-mail adress mentioned above.
  -  Clean and disinfect the complete unit, including its accessories.
  -  The unit and all accessories must be packed sufficiently.
  -  Please enclose this form within the return.

**The above-mentioned packing requirements will be met.**

**Please answer the following questions:**

1. Reasons for return:

Repair	Warranty	Evaluation/Demo unit	Other
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Please describe the occurrence:

2. Security classification of deployment site as per the relevant directives (2000/54/EC; 98/81/EC):

Security class 1	Security class 2	Security class 3	Security class 4
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other standing site (if not covered by any of these), please describe in detail:

3. The unit was in contact with the following substances:      No      Yes (please specify)

- Radioactive substances
- Toxic substances
- Canzerogeneous substances
- Infectious substances
- Biological material
- Other dangerous materials

**The unit was carefully                      cleaned                      disinfected**

Date

\_\_\_\_\_  
Company stamp

\_\_\_\_\_  
Place/Date/Signature