

EXTERNAL REPAIR LETTER

Has the item been Decontaminated? Yes ☒ No ☐

What method of decontamination has been used? Please provide details:

Cleaning Material : Disinfectant wipes / mild soapy wipes / other (please state):
Sani-Cloth Clinical Wipes

DATE	19/08/2024
JOB #	1440342
SUPPLIER	VIAMED LTD
ORDER #	-

ASSET ID	20100700067
SERIAL #	M0004677
MODEL	NERVE STIMULATOR
MANUFACTURER	VIAMED LTD
ACCESSORIES	LEADS
FAULT DESCRIPTION	INTERMITENT (NOT WORKING SOMETIMES) REPAIR REFERENCE : SRS68877

PLEASE ADVISE COST OF REPAIR WITH A FORMAL QUOTE PRIOR TO CARRYING OUT ANY REPAIRS. (If applicable)

Please note that a Service Report should accompany the equipment where appropriate.
To avoid delay in payment the invoice should be sent to the address as per the Purchase Order. Thank you for your co-operation.

Yours faithfully,

MUHAMMAD SAMI UDDIN NASEER

Received Date:

FIELD SERVICE ENGINEER
Sami.naseer@ergeagroup.com

CFDOC 05 Rev 5 DATE 06/01/14