



Ship to:
 SakoMed Biomedical Services
 27751 La Paz Rd. Ste A
 Laguna Niguel, CA 92677
 (844) 433-7256 | info@sakomed.com
 www.sakomed.com

Service Request Form

SRN Number: _____

Facility Name*		First and Last Name*	Email*
Phone	Item Type	Brand and Model	Serial Number
Return shipping address			
Reason for Repair*			

Bill to address (If different than above)	
PO#	

Shipping Tracking Number	FedEx Account number for return
List any accessories you are sending	
Requesting Loaner? (Y/N)	

OFFICE USE ONLY:

Sales Rep:	
Assigned Tech:	
Date:	
Repair Estimate#	

Thank you choosing SakoMod! any Concerns or Questions? Status on your Repair?

Please call (844) 433-7256 or Email info@sakomed.com

Equipment will be sent back unrepaired to your address if we don't hear from you in 90 days.

Rev.0 Approved by CEO 4/22/23