

# INTOXILYZER SERVICE REQUEST

**GCS TECHNICAL SERVICES INC.**

Date:

**SERVICE@GCSTECHNICAL.CA**

**SEND INSTRUMENTS TO: GCS Technical Services Inc. 2446 Blue Holly Cres, Oakville, ON L6M4V4**

**POLICE SERVICE:**

**DETACHMENT/STATION:**

**AUTHORIZING OFFICER and BADGE #:**

**SUBMITTING OFFICER and BADGE #:**

**CONTACT PHONE NUMBER & EMAIL:**

**RETURN ADDRESS:**

INSTRUMENT SERIAL NUMBER	Date Taken From Service	Downloaded prior to shipping?	Contact prior to repair?
#		If Yes...	YES <input type="checkbox"/> NO <input type="checkbox"/>

**Send Invoice to:**

**Date:**

**Time:**

**Officer:**

**Equipment Sent to GCS Technical Services (example - powercord, simulator, etc.)**

**Instrument Issues and Symptoms - full description including error messages (attach photos if damaged):**


**Lab Use Only**

**Corrective Action/Repair and Work Performed/Notes:**


**Authorized Technician:**

**Repair Completion Date:**

**Contacted for delivery/Method of Return:**

**Customer/Vendor ID #:**

service@gcstechnical.ca

www.gcstechnical.ca