



## Repair Return Form

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

PO Number: \_\_\_\_\_

Item Description: \_\_\_\_\_

\_\_\_\_\_

Manufacturer Name: \_\_\_\_\_

Model Number: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Additional Nameplate: \_\_\_\_\_

\_\_\_\_\_

Description of Problem: \_\_\_\_\_

\_\_\_\_\_

Please send to:

**BUCKEYE PUMPS, INC**  
**1311 FREESE WORKS PLACE**  
**GALION, OH 44833**

Locations: Columbus, Cleveland, Galion, Middletown, Toledo, OH; Scott Depot, WV; Lexington, Louisville, KY; Evansville, Indianapolis, Terre Haute, Fort Wayne, IN; Battle Creek, Grand Rapids, Detroit, MI; St. Louis, MO; Tupelo, MS; Pittsburgh, PA; Newington, CT

WEB SITES: [www.otpnet.com](http://www.otpnet.com) [www.aip-usa.com](http://www.aip-usa.com) [www.ipeg-stl.com](http://www.ipeg-stl.com) [www.buckeyepumps.com](http://www.buckeyepumps.com)

# DECONTAMINATION

**Water Service**

**MSDS Included**

(Not required for water service)

**OTHER (Note Below)**

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**Chemical Exposed to:** \_\_\_\_\_

**Equipment ID:** \_\_\_\_\_

*Note: This tag acknowledges cleaning of the contents according to standards or procedures established by the customer in compliance with State and Federal requirements.*

**Additional Comments:** \_\_\_\_\_

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**Signed:** \_\_\_\_\_ **Title:** \_\_\_\_\_