



Repair Request Form

Contact Information:

Name: _____
Phone Number: _____
Email address: _____

Billing Information:

Address 1: _____
Address 2: _____
City: _____
State / Province: _____
Zip / Postal Code: _____

Return Shipping information: *(if different than Billing)*

Address 1: _____
Address 2: _____
City: _____
State / Province: _____
Zip / Postal Code: _____

Tool(s) Returned for repair:

If warranty repair requested, please include dated proof of purchase. Please enter any additional information in the comments. Please fill out a Repair Request for each part needing repair.

Part No.: _____
Reason for Repair: _____
Warranty? Please include _____
Proof of Purchase: _____
Comments: _____

- Please document if certification is required in reason for repair notes.
- Please print this document and include it inside the shipment with your tool.
- A Starrett representative will contact you with a quotation prior to repairing your tool.

Thank you!