

SRM Service Center
720 W. Monument St. Ste 200
Colorado Springs, CO 80904
Email: usa@srm.de

Phone: (719)266-4127

Ridesrm.com



Customer info:

Customer Name / Business Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: (_____) _____ - _____ Email: _____

Service instructions:

- For ALL PowerMeter Service - Include the RIGHT (drive-side) crank arm and chainrings for most accurate calibration. (We do not need the left arm)
- For X-Power Pedals include both Right and Left pedals.
- For Wired SRM PowerMeters - Include the sensor cable and PowerControl IV or PowerControl V for complete testing of your SRM system.
- For PowerControl Service - Include your PowerControl and any accessories (speed pod, sensor cable, etc.) that you would like to be tested.
- Clean your parts of grease, chain lube and other contaminants or you will be charged a \$20 cleaning fee.
- Package your PowerMeter and PowerControl with padding/bubble wrap to ensure protection during shipping. Please include this form in the box.
- Ship your package to the address at the top of this form.
- **! Products sent without this service form included may delay your service turnaround time!**

Reason for service: (tell us what you need or describe the issue you are experiencing with your product, if also ordering new product - list it here)

I authorize all repair costs needed to return my product back to full functionality. <https://onlineshop.srm.de/usa/s/>

Customer Signature: _____

Payment info: Credit Card Information is not kept on file.

Billing Street Address: _____ City: _____

State: _____ Zip: _____ Name on Card: _____

Card #: _____ Expiration Date: _____ CCV #: _____

Card Type (select one): Visa Mastercard American Express

office use only:

Service Number: _____	Date Received: _____	By: _____									
(1) PowerMeter #: <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						Type: _____	CRs: ____ / ____ / ____	Length: _____	<input type="checkbox"/> R Arm	<input type="checkbox"/> L Arm	Other: _____
(2) PowerMeter #: <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						Type: _____	CRs: ____ / ____ / ____	Length: _____	<input type="checkbox"/> R Arm	<input type="checkbox"/> L Arm	Other: _____
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