

COVER LETTER FOR CALIBRATION

Send the completed cover letter directly to your contact firstname.lastname@vtt.fi or to kalibroinnit@vtt.fi.

Client contact details * mandatory information

Company name *	
Business ID	
Address of client * (to calibration certificate)	
Address for sending calibration certificate <input type="checkbox"/> Same as client address	
Return address for the device <input type="checkbox"/> Same as client address	
Billing address <input type="checkbox"/> Same as client address	
Order number / reference *	
Name of contact person *	
Phone number	
Email address *	
Contact person at MIKES	
Additional information	

Method for returning *:

- Pick up
- Contract of carriage / company / client number:
- MIKES's contract of carriage / mail
- Other:

Delivery addresses for calibration:

Length, environmental and electrical metrology
 VTT MIKES/calibrations (contact person)
 Tekniikantie 1, FI-02150 Espoo, Finland
 (tel. +358 400 841 851)

Force, torque and liquid flow calibrations and high capacity weights (>50 kg):
 VTT MIKES/calibrations (contact person)
 Tehdaskatu 15, Puristamo 9P19, FI-87100 Kajaani, Finland (tel. +358 50 443 4213)

In calibration assignments, [VTT's General Terms of Contract](#) will be followed where applicable.

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Devices to be calibrated

Device 1

Device	
----- Manufactured by	
----- Model	
----- Serial number	
----- Number of previous calibration certificate (if available)	
----- Additional information: calibration method, measurement ranges, measurement points, etc.	

Device 2

Device	
----- Manufactured by	
----- Model	
----- Serial number	
----- Number of previous calibration certificate (if available)	
----- Additional information: calibration method, measurement ranges, measurement points, etc.	

Device 3

Device	
----- Manufactured by	
----- Model	
----- Serial number	
----- Number of previous calibration certificate (if available)	
----- Additional information: calibration method, measurement ranges, measurement points, etc.	

Whenever possible, please provide operating or/and handling instructions of the device to be calibrated.

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Devices to be calibrated

Device 4

Device	
Manufactured by	
Model	
Serial number	
Number of previous calibration certificate (if available)	
Additional information: calibration method, measurement ranges, measurement points, etc.	

Device 5

Device	
Manufactured by	
Model	
Serial number	
Number of previous calibration certificate (if available)	
Additional information: calibration method, measurement ranges, measurement points, etc.	

Device 6

Device	
Manufactured by	
Model	
Serial number	
Number of previous calibration certificate (if available)	
Additional information: calibration method, measurement ranges, measurement points, etc.	

Whenever possible, please provide operating or/and handling instructions of the device to be calibrated.