Extended Warranty for the IDEXX UV Viewer PLUS

The IDEXX UV Viewer PLUS* allows users to read fluorescent test results quickly and easily—a critical capability for water testing laboratories. IDEXX is pleased to offer the peace of mind of an extended warranty—guaranteeing replacement in the unlikely event of an instrument failure.

The IDEXX UV Viewer PLUS has a one-year warranty that guarantees instruments conform to our documentation for one year (See "General Terms", available at **idexx.com/NATerms**). Users can purchase an extended warranty to cover the UV Viewer PLUS for an additional 4 years.

This offering is described in further detail below. Visit **idexx.co.uk/UVExtendedWarranty** or contact your IDEXX representative to review the full terms and conditions of this offering.

UV Viewer PLUS Extended Warranty

Product Name and Part Number	Description	Price	Other notes (review terms and conditions for full coverage details)
UV Viewer PLUS Extended Warranty (95-0020290-02)	Extend the UV Viewer PLUS one- year warranty to five years from the date of purchase.	£ 317.04	 + IDEXX will replace the UV Viewer PLUS in the event of instrument failure within 5 years of the date of purchase. + Users must contact IDEXX Technical Support. The Technical Support team will make reasonable efforts to troubleshoot issues that can be easily repaired before a replacement is issued. + Instruments not used in accordance with our product instructions are not eligible for replacement.



General notes

- + All prices and descriptions above are specific for customers in Europe. The extended warranty may not be available for all customers or situations. Speak with your IDEXX representative to learn more.
- + Eligibility period: The IDEXX UV Viewer PLUS* Extended Warranty must be purchased within first 12 months after purchase of the instrument.
- + The prices and descriptions in this table are accurate as of the time of publication but are subject to change over time. Check with your IDEXX representative to learn more. The enclosed order form must be used to purchase this extended warranty.

Order form: Coverage and Instrument Information

Address — ZIP/Postal Code — Country —	Laboratory Name ————————————————————————————————————		
City — ZIP/Postal Code — Country —	-		
Telephone Email Fax			
UV Viewer PLUS Serial Number(s) ————————————————————————————————————			

To be completed by an IDEXX representative (optional information for customer records)

Serial Number	Initial Purchase	PO Number	Coverage Dates

