

Repair acceptance form

For effective machining, please fill out the form and enclose it with the defective device.

Device: Serial Nr:

new condition used fall damage water damage

Company:

Address:

Zip code / City:

Telephone:

E-mail:

VAT ID:

accessories:

- warranty repair** (Only with purchase invoice !)
- paid repair**
- Cost estimate desired** (fee 114,00€ net plus tax, in case of rejection of the estimate)

Error Description:

error constant error sporadically Long operation error

Repairs under 114€ are carried out directly

Date:

signature: