

Date (day/month/year) _____

REPAIR ORDER

1. Customer

Company, department
Street, No.
Postcode, place, country
First name, last name
E-mail
Telephone
Your Order No./Reference No.
(appears on all documents)

2. Description of the defect

Please provide detailed information about the defect.

Item description
Location of installation
b+m item No.
Serial No.
Description of defect

2.1 State of the component

- Device has visible defects on the outside.
- Device disassembled or incomplete.
- Device dirty, cleaning necessary.

3. Warranty

- Warranty claim for the repair
Date of purchase: _____
Invoice No.: _____

Please attach copy of invoice to this form.

Should the examination reveal that the case claimed is not covered by warranty, we will prepare a cost estimate which will be charged with € 80.00 excluding VAT. Upon order placement, this amount will be settled against the repair costs.

4. General

- Please prepare a cost estimate. The cost estimate will be charged with € 80.00 excluding VAT. Upon order placement, this amount will be settled against the repair costs.
- Please repair immediately, if costs are below € _____ or below _____ % of the original price.

Date: _____

Order placed, terms & conditions accepted: _____
Signature