

# Claim request



<b>Your contact person at Pentronic</b>	<b>Customer order no</b>	<b>Customer claim no:</b>
	<b>Pentronic order no:</b> (to be filled in by Pentronic):	<b>RMA-nr</b> (to be filled in by Pentronic):

## Problem description

1. Describe the issue (E.g. wrong product, damaged product, functional error, dimensional error)
2. When was the problem detected? (E.g. on delivery, unpacking, during installation, during usage)
3. Has the product been operational?  
If so, please give the conditions of operation (temperature, environment/media etc.)

Part no alt. serial no	Part description	Quantity

**Has the product been installed?**

**Yes**

**No**

If "Yes", the product shall be free of unhealthy contamination, to be handled safely without special protecting equipment. Hereby I confirm that the returned products fulfill the cleanliness requirement.

**Signature**

**Date**

## Customer and contact person

*Customer*

*Person*

*Phone no and mail address*

*Delivery address:*

**Please return the product with this form to:**

Pentronic AB  
Bergsliden 1  
SE-593 96 Västervik