LIGHTEQUIP
DIE LICHTWERKER GMBH & CO. KG

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REPAIR ORDER

PURCHASER

Customer ID: _____
Company: _____
Contact person: _____
Adress: _____
ZIP/Location: _____
E-Mail: _____
Phone: _____

DEVICE DATA

Manufacturer: _____
Device Typ: _____
Serial: _____

ACCESSORIES

- ☐ Case / Bag
- ☐ Power Cable
- ☐ Power Supply
- ☐ Connection Cable
- ☐ Controller
- ☐ Original Packaging
- ☐ Control Box
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

DESCRIPTION OF DEFECT

Note: "Defect" is not an error description !

WARRANTY/ VERSICHERUNG

☐ **Warranty** ☐ **Insurance Claim**

Invoice Nr.: _____
Date of Invoice: _____

QUOTATION

☐ **Quotation**

from _____ Euro

Total Loss ?

☐ Displose
☐ Back unrepaired

INTERN

Rep.-Nr.: _____
Rep. angenommen durch: _____
Rep. angenommen am: _____