

Return shipment



| | | | |
|------------------------------|------------------------|-----------------------------------------------------|----------------------|
| Delivery to manufacturing | | Date: | |
| Microair Sp. z o.o. | | Project Number: | |
| Westerplatte 68 | | Part of a modification/conversion: | |
| | | Yes: | |
| | | No: | |
| 58-100 Świdnica | | | |
| Poland | | Return shipment of the repaired unit to the sender: | |
| | | Yes: | |
| | | No: | |
| Sender | | | |
| Company: | | | |
| Contact Person: | | | |
| Telephone Number: | | | |
| Street: | | | |
| Postal Code/City: | | | |
| | | | |
| Qty. | Description | | Serial Number |
| | Control panel | | BP - |
| | Protective ventilation | | S84.0- |
| | Air recirculation unit | | UA31.0- |
| | | | |
| Description of fault: | | | |
| | | | |
| | | | |

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|--------------------------------------------------------|--|
| To be completed by the service technician only: | |
| Name: | |
| Serial number of replacement unit: | |

**Please use this enclosed return form when returning the defective component.
 We kindly ask you to complete this return form in full and describe the defect.
 We will gladly arrange collection after you notify us that the shipment is ready for dispatch.
 The defective component must be sent to the return address within one week.**