



RETURN OF PARTS

Date: Your return no:
 Reference: Phone: E-mail:

The case concerns:

Return Warranty Check up Repair

If warranty, please provide: (warranty claims reported after warranty date have been expired is void)

Purchase on order/invoice:
 Delivery date:
 Deployment date:
 Support Case no#:

Replacement purchase on order/invoice:
 Date of repair:
 Date reported to Excidor:

Send to:
 Excidor AB
 Industrigatan 7
 SE-821 41 Bollnäs
 Sweden

Sender:
 Company:
 Address:
 Zip/City:
 Country:

Returned parts:

Part no.	Subject	Serial no.	Quantity

Description of failure:

Note!

To be able to seek compensation for cost of repair, the repair has to be of a kind that either: not can be performed by the machine owner/operator, or that broken unit can't be sent to Excidor for repair. Before starting the repair, there must be a written (e-mail with estimated cost) permission from responsible technician at Excidor.