

Service order

Send the completed service order with the device to the following address:
airleben GmbH | Rudloffstraße 23 | 99867 Gotha
 or e-mail: gotha@airleben.de

Invoice adress / client

Company:	_____	Phone:	_____
Street:	_____	Fax:	_____
Zip code:	_____	Mobile:	_____
City:	_____	E-mail:	_____
Contact person:	_____	Customer no.:	_____

Device type:	airLPT321 airLPT216 airLPT113	Serial no.:	DE
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Work to be carried out:

Maintenance/inspection (includes cleaning, filter replacement, device inspection)	215,- € net
Factory calibration	185,- € net
Repair	depending on effort

Error specification for repair

Please repair the device immediately up to a net value of 200€.

Please to not carry out any repairs. Please send me a cost estimate in advance.
 (The cost of a cost estimate is 22€)

Date: _____ Name: _____

Signature/
 stamp _____