

Termoprodukt ul. Tkacka 17 58-260 Bielawa

Calibration Repair **form***

Date: info@termoprodukt.com.pl

CUSTOMER INFORMATION

Company Name:	TAX ID:
Complete Address:	E-mail:
Name of Applicant:	Telephone No.:

PRODUCT INFORMATION

Model:	Serial No.:
	Type:

<input type="checkbox"/> Calibration in Manufacturer's Laboratory <input type="checkbox"/> Standard Calibration <input type="checkbox"/> Calibration at particular measuring points:**	<input type="checkbox"/> Calibration in Accredited Laboratory <input type="checkbox"/> Standard Calibration <input type="checkbox"/> Calibration at particular measuring points:**
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Details of the defect or problem:

NOTICE: Please remember to attach the original guarantee card or a copy of the invoice for the device in case the guarantee card has not been issued.

This form should be attached to the device in your shipment to

TERMOPRODUKT
Ul. Tkacka 17
58-260 Bielawa
POLAND

with a note "Laboratory" to calibrate the device or "Repair Department" to repair it.

In case of unjustified complaints delivery and repair costs are paid by the Customer. Goods which cannot be repaired or repair value exceeds its commercial value, which is not received within 30 days of receipt by the applicant about this fact, in the absence of a separate written decision of the Applicant expressed before expiration date shall be disposed of by Termoprodukt without any additional calls.

I give my consent to my personal data being placed in the clients database. I hereby declare that, on the basis of the Act of the Personal Data Protection of 29 August 1997 (Journal of Laws, No. 133, with subsequent amendments). I give my consent to my personal data being placed in the clients database of the company Termoprodukt ul. Tkacka 17, Bielawa, Poland, and to my personal data being processed at present and in the future for communications purposes. Moreover, I hereby give my consent to receiving marketing information prepared by Termoprodukt. At the same time, I understand that providing the data is voluntary and that I have the right to access and correct the data.

Date and place:

Signature: