

## **Quotation form BOSCH REXROTH SM 25/50-T/C1**

In order to avoid unnecessary delays related to the order reception process, you are kindly asked to complete the form in full and send it to us along with the malfunctioning device.

С			
		5:	
	Personal collection of device:	Yes/No	
С	ontact person information:		
	First name, surname:		
	Phone:		
	E-mail:		
	E-mail of person authorised to handle payments:		
	payments:		
	authorised to handle		
	authorised to handle		
	authorised to handle		
	authorised to handle		
	authorised to handle		
	authorised to handle		
	E-mail of person		
	E-mail:		
	F-mail·		
	Phone:		
	Phone:		
	First name, surname:		
J			
С	ntact person information:		
С	ontact person information:		
		Yes/No	
	Address for shipping:		
		5.	
	Registered office address	S:	
	Tax ID. (NIP):		
	Name:		
	Name:		
	Name:		
J			
С	mpany information:		
_			
	Error codes / information	displayed on screens (if applicable):	
	Error codes / information	displayed on screens (if applicable):	
	Error codes / information	displayed on screens (if applicable):	
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	Brief description of the fac	ıılt·	
Fa	ult description:		
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	Model:	SM 25/50-T/C1	
	Manufacturer:	BOSCH REXROTH	