

Quotation form SABO DEB.510.00

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.

Device descripti	on:			
	Manufacturer:	SABO		
	Model:	DEB.510.00		
Coult description				
Fault description	Brief description of the fau	t·		
	bilet description of the radit.			
	Error codes / information displayed on coroons (if applicable):			
	Error codes / information displayed on screens (if applicable):			
Company inform	nation:			
Company imorn	Name:			
	Tax ID. (NIP):			
	Registered office address:			
	Address for shipping:			
	Personal collection of	Voo/No		
	device:	Yes/No		
Contact person	information:			
	First name, surname:			
	Phone:			
	E-mail:			
	E-mail of person			
	authorised to handle			
	payments:			
eby declare that I	have familiarised myself wit	h the Repair Service Regulation	ns made available to me by RGI	B Elektronika Agaciak
ek Spółka Jawna	with its registered office in \	Vrocław and I accept its provisi	ons.	
PPING ADDRESS	:	Contact:		
RGB Elektronika				
spółka z ograniczoną odpowiedzialnością sp. k. Jana Długosza 2-6		k. <u>24/7 +</u>	48 71 750 09 77	
		⊠ info24	<u>@rgbrepairs.com</u>	
51-162 Wrocław				
Poland				