

Quotation form VIPA 114-6BJ02

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.

Model: 114-6BJ02 description: Brief description of the fault: Error codes / information displayed on screens (if applicable): pany information: Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail of person authorised to handle		Manufacturer:	VIPA	
Brief description of the fault: Error codes / information displayed on screens (if applicable): pany information: Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: Yes/No act person information: First name, surname: Phone: E-mail: E-mail of person		Model:	114-6BJ02	
Brief description of the fault: Error codes / information displayed on screens (if applicable): pany information: Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: Yes/No act person information: First name, surname: Phone: E-mail: E-mail of person	Fault docori	intion:		
Error codes / information displayed on screens (if applicable): pany information: Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: Yes/No act person information: First name, surname: Phone: E-mail: E-mail of person	rault descri		ault.	
pany information: Name:		Bhot decomption of the	aut.	
pany information: Name:				
pany information: Name:				
pany information: Name:				
pany information: Name:				
pany information: Name:		Error codes / information	n displayed on scree	ens (if annlicable):
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person		Life codes / informatio	ii dispiayed on serec	eris (ii applicable).
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person				
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person				
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person				
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person				
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person				
Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person	Company ir	nformation:		
Registered office address: Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person				
Address for shipping: Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person		Tax ID. (NIP):		
Personal collection of device: act person information: First name, surname: Phone: E-mail: E-mail of person		Registered office addre	ss:	
device: Yes/No		Address for shipping:		
device: act person information: First name, surname: Phone: E-mail: E-mail of person			Yes/No	
First name, surname: Phone: E-mail: E-mail of person		device:	1.00,110	
First name, surname: Phone: E-mail: E-mail of person	Contact per	son information:		
Phone: E-mail: E-mail of person				
E-mail: E-mail of person				
E-mail of person				
payments:				
payments:		E-mail: E-mail of person authorised to handle		
clare that I have familiarised myself with the Repair Service Regulations made available to me by RGB Elektronika Agaciak	ek Spółka Ja	wna with its registered office	in Wrocław and I acc	cept its provisions.
clare that I have familiarised myself with the Repair Service Regulations made available to me by RGB Elektronika Agaciak Jika Jawna with its registered office in Wrocław and I accept its provisions.				
		ESS:		Contact:
iłka Jawna with its registered office in Wrocław and I accept its provisions.	PING ADDR	iika		
ADDRESS: Contact: lektronika	PING ADDRI	spółka z ograniczoną odpowiedzialnością sp. k.		<u>24/7 +48 71 750 09 77</u>
ADDRESS: Contact: lektronika	RGB Elektron	niczoną odpowiedzialnością	-	
ADDRESS: Contact: lektronika z ograniczoną odpowiedzialnością sp. k. lugosza 2-6 info24@rgbrepairs.com	RGB Elektron półka z ogra lana Długosz	a 2-6		⊠ info24@rgbrepairs.com
ADDRESS: Contact: lektronika z ograniczoną odpowiedzialnością sp. k. lugosza 2-6 Wrocław Contact: 24/7 +48 71 750 09 77 info24@rgbrepairs.com	RGB Elektron półka z ogra	a 2-6		⊠ info24@rgbrepairs.com