

Quotation form PRO-FACE AGP3400-T1-D24-FN1M

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 descrip	tion:		
	Manufacturer:	PRO-FACE	
	Model:	AGP3400-T1-D24-FN1M	
Fault description	no:		_
Brief description of the fault:			
	Bilet description of the lac		_
	Error codes / information displayed on coroons (if applicable):		
Error codes / information displayed on screens (if applicable):			_
Company infor	mation:		_
Company inion	Name:		
	Tax ID. (NIP):		_
	Registered office address		_
	Address for shipping:		_
	Personal collection of		
	device:	Yes/No	
Contact persor	information:		_
	First name, surname:		7
	Phone:		_
	E-mail:		_
	E-mail of person		_
	authorised to handle		
	payments:		
aby doolore that I	hove familiarized myself wi	th the Repair Service Regulations made available to me by R	CD Flaktronika Agasiak
		Wrocław and I accept its provisions.	36 Elektronika Ayaciak
PING ADDRESS	S:	Contact:	
RGB Elektronika			
	zoną odpowiedzialnością sp.	k. <u>24/7 +48 71 750 09 77</u>	
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Poland			