

## **Quotation form OMRON SGMAH-04A1A21D**

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	otion:		
	Manufacturer:	OMRON	
	Model:	SGMAH-04A1A21D	
Fault description	on:		
raun descripin	Brief description of the f	ult:	
	2.101 documpation of the fi		
	Error codes / information displayed on screens (if applicable):		
	Error codes / information		
Company infor	mation:		
Company inioi	Name:		
	Tax ID. (NIP):		
	Registered office addres	5:	
	Address for shipping:		
	Personal collection of	VINI-	
	device:	Yes/No	
Contact persor	n information:		
	First name, surname:		
	Phone:		
	E-mail:		
	E-mail of person		
	authorised to handle		
	payments:		
eby declare that	I have familiarised myself v	rith the Repair Service Regulations made available to	me by RGB Elektronika Agaciak
		Wrocław and I accept its provisions.	
PING ADDRES	S:	Contact:	
RGB Elektronika			
	zoną odpowiedzialnością s	o. k. <u>24/7 +48 71 750 09 77</u>	
Jana Długosza 2	2-6	⊠ <u>info24@rgbrepairs.com</u>	
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Poland			