

Quotation form SEW EURODRIVE KA37/T CMP63L/KY/RH1M/KK

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.

Manufacturer: SEW EURODRIVE Model: KA37/T CMP63L/KY/RH1M/KK	Device descrip	otion:			
Fault description: Brief description of the fault: Error codes / information displayed on screens (if applicable): Company information: Name: Tax ID. (NIP): Registered office address: Address for shipping: Personal collection of device: Personal collection of device: First name, surname: Phone: E-mail: E-mail of person authorised to handle payments: Brief description of the fault: E-mail of person authorised to handle payments: Brief description of the fault: E-mail of person authorised to handle payments: Contact person information: Brief description of the fault: E-mail of person authorised to handle payments: E-mail of person authorised to handle payments: Brief description of the fault: E-mail of person authorised to handle payments: Contact: C			SEW EURODRIVE		
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