

## **Quotation form STAUBLI D23163904**

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:	STAUBLI
	Model:	D23163904
Fault description	on:	
r dait decempt	Brief description of the fau	ult:
	Error codes / information o	displayed on screens (if applicable):
Common info		
Company info	Name:	
	Tax ID. (NIP):	
	Registered office address:	:
	Address for shipping:	
	Personal collection of	Yes/No
	device:	TESTINO
Contact perso	n information:	
	First name, surname: Phone:	
	E-mail:	
	E-mail of person	
	authorised to handle	
	payments:	