

Quotation form POWER-ONE MAP55-4000

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:	POWER-ONE
		Model:	MAP55-4000
F	ault descriptio		
		Brief description of the fau	IIT:
		Error codes / information of	displayed on screens (if applicable):
_	ompany inforn	action:	
C	σπραπή πποπ	Name:	
		Tax ID. (NIP):	
		Registered office address:	
		Address for shipping:	
		Personal collection of	Ves (N.)
		device:	Yes/No
C	ontact person	information:	
Ü	ontact person	information.	
		First name, surname:	
		Phone:	
		E-mail:	
		E-mail of person	
		authorised to handle	
		payments:	
			th the Repair Service Regulations made available to me by RGB Elektronika Agaciak
ek S	Spółka Jawna	with its registered office in	Wrocław and I accept its provisions.
PIN	IG ADDRESS	:	Contact:
RGI	B Elektronika		0.4/7 .40 74 750 00 77
		oną odpowiedzialnością sp.	k. 24/7 +48 71 750 09 77
	a Długosza 2-	6	
	L62 Wrocław		
Ola	and		