



4.13 Service/ Claim Report

Company

Address		Customer (if other than company)	
ZIP-code	City	Contact Person	
Country		Phone	E-mail

Product name	Article No.	
Serial No.	Purchase date	Date of installation at customer

Running time (Days/shifts/ hours)	Maintenance done? (When, what kind and by whom)
Kind of media? (Type of fluid/ Kind of PVC etc.)	

Description of the problem (please attach photo)

Date when part was shipped to Ecco?	Logistic partner & Tracking number?
Special request for return of goods?	