**To be completed by Sender** Consignee

Company Name: ………….………….……………………………… **SIUS AG**

First/Last Name: ………….………….……………………………… Repair dept.

Street/No.: ………….………….……………………………… Im Langhag 1

ZIP/City: ………….………….……………………………… 8307 Effretikon

Country: ………….………….……………………………… Switzerland

Phone: ………….………….……………………………… +41 52 354 60 44

e-mail: ………….………….……………………………… repair@sius.com

Date: ….../….../…….…... SIUS Project No.: P- …...……………..……

Required for warranty

Your Project ID: ………….………….……………………………… Customer No.: C- …...….…….…………

Installation Date: ….../….../…….…...

Defective Item: ………….………….……………………………… Serial Number: .……...……………………

Defect/Problem Detailed report reduces repair time and cost

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Additional Comments

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**To be completed by SIUS**

Date of Reception: ….../….../…….…... Repair No.: P- …...……………..……

Date of Repair: ….../….../…….…... Customer No.: C- …...……….….………

Warranty:  Yes  No

Defective Component  Mechanical Defect  Overvoltage  Lightning  Water Damage

Small Component Replaced  Part Replaced  Complete Replaced  Software Update

No fault found. We checked your device thoroughly but could not find the claimed defect. Should the same error occur within 6 months and it can be   
 understood by SIUS AG this checking lump-sum will be deducted from the invoice for reparation or exchange.

Fully Checked  Worn Wear Material Replaced

Additional comments

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