

CLAIM/REPAIR COVER LETTER

Fill in this form and attach a copy of it to your shipment. Request a CLAIM/REPAIR number for your shipment from our technical sales or maintenance unit. Mark your shipment with the same CLAIM/REPAIR number.

CLAIM/REPAIR number		Date	
Sender			
Sender - name:		Return receiver: (if not sender)	
Company name and invoicing address:		Return address: (if not sender)	
Opening hours:		Sender - mobile phone:	
Sender - E-Mail:			
Shipment includes			
Products	pcs	Serial/production Nr. (if available)	
Reason for CLAIM/REPAIR			
Configuration <input type="checkbox"/>	Modification <input type="checkbox"/>	Inspection <input type="checkbox"/>	Repair <input type="checkbox"/>
Other reason / more details:			
More details:			
Shipping address		Our maintenance personnel	
Lapp Automaatio Oy Huolto, CLAIM/REPAIR number _____ Varastokatu 10 FI-05800 Hyvinkää, Finland telephone +358 (0)20 764 6410 service.fi.lav@lapp.com		Petri Haikarainen , tel. +358 20 764 8334 Marko Pitkäaho , tel. +358 20 764 8335	