

# Service request



Customer Name:	<input type="text"/>	Customer number:	<input type="text"/>
Address:	<input type="text"/>	Phone:	<input type="text"/>
Contact person:	<input type="text"/>	E-Mail:	<input type="text"/>
Product/System:	<input type="text"/>	Date:	<input type="text"/>

## Die Warenlieferung erfolgte mit:

Order number:	<input type="text"/>	Date of delivery:	<input type="text"/>
Article description:	<input type="text"/>	Article number:	<input type="text"/>
Quantity:	<input type="text"/>	Serial number:	<input type="text"/>
First use / Initial operation:	<input type="text"/>	Date of failure:	<input type="text"/>

The article has been used for: (Application, flow medium, operating pressure, temperature etc.)

**Claim** (Please note that „damage“, „failure“ or „without function“ is not sufficient.)

## Site of operation:

wishes to be contacted     wishes to be visited by a Hauhinco Service technician     sent article(s) back

All mandatory fields are marked red. Please fill out all remaining fields as completely as possible and send the form to the below mentioned contact. A reference number will be sent to you afterwards.

**Hauhinco Maschinenfabrik GmbH & Co. KG | Beisenbruchstraße 10 | D-45549 Sprockhövel | Germany**

**Phone: 02324/705-0 or -337 | Fax: 02324/705-119 or -154**

By clicking on one of the following eMail addresses this form can directly be sent as an eMail attachment:

[service@hauhinco.de](mailto:service@hauhinco.de)

[sales@hauhinco.de](mailto:sales@hauhinco.de)

Only completed forms with correct information can be processed. Unannounced returned goods lead to severe delays in the work process.

To be filled out by Hauhinco Maschinenfabrik :

Angenommen:	<input type="text"/>	Eingangsdatum:	<input type="text"/>
Bearbeitung durch:	<input type="text"/>		
Vorgangsnummer:	<input type="text"/>		

Status Serviceanfrage/Serviceeinsatz:

erfasst durch S     Gewährleistung     Kundendiensttermin     siehe Anlage  
 Beanstandung ablehnen     Umtausch     Weiterleitung an: