akkuteam
ENERGIETECHNIK

Please fill out this form completely in capital letters. Send the completed form by fax +49 5521 9981-11 or by e-mail charger@akkuteam.de.
We will contact you immediately!

Battery Chargers

Request for repair

For conducting your order/claim for warranty we need an official order of your company.

☐ **Charge Cube 12-40** **serial-number** _____

☐ **Charge Cube 12-100** **serial-number** _____

☐ **SL 50** **serial-number** _____

☐ **SmartCharge** **serial-number** _____

☐ **ShowroomCharger** **serial-number** _____

Brief fault description:

_____

VAT-Nr. (In case of European Community) _____

Legal company name – invoice address:

Company _____

Street/No. _____

ZIP-Code/City _____

E-Mail _____

Contact person _____

Phone/Fax _____

Your Order-No/Commission _____

Return address: (if different from invoice address)

_____

Repairs up to 85 Euro/net will follow immediately on principle!!!
You will receive a cost estimate, if this sum presumably will be exceeded!

Release for repair up to 50 % of original price ☐ Yes ☐ No

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