



**Error Report → Please fax to +49(0)89614171-71**

Please fill in this report and fax it back to us. The more detailed your report is, the faster we can support you.

**Sender:**

Company:	_____
Contact Person:	_____
Department:	_____
Address:	_____
Postal Code, City:	_____
Country:	_____
Telephone:	_____
Fax:	_____
E-Mail:	_____
Date:	_____

**Error Description:**

Type of device: _____	Manufacturer: _____	Serial-No. _____
<b>Type of error?</b>		
<input type="checkbox"/> total breakdown	<input type="checkbox"/> außer Toleranz	<input type="checkbox"/> Calibration / Check-up
<input type="checkbox"/> other: _____		
<b>When does the error occur?</b>		
<input type="checkbox"/> permanently	<input type="checkbox"/> temporarily	<input type="checkbox"/> under hot running conditions
<input type="checkbox"/> under cold conditions	<input type="checkbox"/> others: _____	
Since when does the error occur? _____		
<b>For which application is the device used? (please enclose additional sheet if necessary)</b>		
_____		
<b>Detailed error description:</b>		
_____		
_____		
When do you need the device back at your facility latest? _____		