

Repair order If this is in respect of a warranty claim, please enclose a copy of the invoice!

Order No. / Order date	Customer No.	- please state	Delivery note / Invoice No.
Originator / Contact person (in case of	f queries):	Shipping addres	s (if different):
Company / Department		Company / Depa	artment
Street		Street	
Postcode, place		Postcode, place	
Telephone		Important not We allow ourse	e Ives to charge the costs of CHF 70.00,
Fax			nment of an estimate in case the repair
E-mail		Delivery address Brütsch/Rüegger Tools Ltd. ServiceCenter	
Function		Heinrich Stutz-S 8902 Urdorf	trasse 20
First name / surname			
_	air subject to a maxir enclose a copy of th		excl. VAT and shipping
Certification			
SCS certificate	ISO certific	ate 🗌 Fact	ory certificate
Date and signature:			
		Brütsch/Rüegger Heinrich Stutz-Stra P.O. Box · 8902 Un Phone +41 44 736 www.brw.ch · info	asse 20 dorf · Switzerland 63 63 · Fax +41 44 736 63 00