receiver:

Schorpp Gerätetechnik Rosenhag 4 DE 88662 Überlingen

date _____

SERVICE FORMULAR

Company		
Name		
Street		
Postcode / City		
Phone		
Fax		
Mail		
Device type		
Serial N°		
Date of last check		
SERVICE BASIC IN	IFORMATION:	
Routine calibration		Yes No
You have detecte	d temperature inaccuracies? How mu	ch °C
With which subst	ances the inaccuracy was determined	
The device is defe	ect? Short description of the error	
Broken capillary in the heating block		Keyboard defective
Heating block contaminated		Loupe lighting defective
Display defective		Fan function defective

TRANSPORT INFORMATION

Pack your device upholstered in a cardboard box for safe transport. Please do not add accessories such as capillary, power cable, protective hood.