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Date:

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This is a PDF form. Your entries can be saved.

## **Service-/Repair Form Breathing Protection**

Please fill in this form completely and attach to shipment.

Customer's Data  Company:	Return Address (if different)
Contact person:	
Street:	
Postal code / City:	
Phone / Mobile:	
Mail:	
Device designation:	
Serial number:	
Scope of Delivery (Breathing protection devices only)	
Reason for Servicing / Notes	
ATTENTION!	ontomination by biological showing and
Please note that all products to be sent in must be free from contact hazardous substances.	ontamination by biological, chemical and
You are required to carry out a proper cleaning before sending essential to protect employees from toxic or other hazardous	
Please note that in case of contaminated devices, information be provided. The costs of a cleaning by the manufacturer can	be up to 250€.
Information about the Contamination	
A. The device is contaminated with:	
B. The device has been cleaned properly:	
☐ Yes, with	(kind of cleaning, cleaning agent)
□ No (see C.)	
C. If the device hasn't been cleaned, the contamination is to be precise Harmful substances:	ed (e.g. skin-irritant, corrosive, oxidizing, radioactive):
I/we hereby declare that the entries in this form are correct an contaminated devices and components will be carried out in a	d complete. The shipment of the accordance with the statutory regulations.

**Legally Binding Signature (Customer):**