



AREA COOLING SOLUTIONS Sp. z o.o.
 ul. Relaksowa 27
 55-080 Nowa Wieś Wroclawska
 tel/fax: +48/71 354 56 24, fax: +48/71 354 56 22
www.area.pl

Claim report

E-mail or company fax number: Contact to the applicant which will be sent correspondence of complaint. Company address, if it is not in the imprint.

.....
 Date:

Equipment Type: compressor / unit / fan / automatic / chiller / rack

/.....

(Please tick the appropriate)

Equipment name:.....

Serial number:.....

Batch number:.....

Date of purchase, invoice number:.....

Date of start-up:.....

Date of failure:.....

Refrigerant:.....

Application :.....

System parameters:.....

(LP, HP, superheating, power)

Security system:.....

(security types, settings)

Preassure switch set value HP:.....

Preassure switch set value LP:.....

Description of failure:

.....
 Client's expectations in the case of a positive result of complaints: (Please tick the appropriate)

new element / correction of invoice no.

In the case of a negative result of complaint, equipment is ready to receive at the headquarters of the Area Cooling Solutions within two weeks, or it can be sent to the address at the expense of the customer. After this date the unit is scrapped. Advertised equipment after inspection is unable to piece together and work. The Protocol should be accompanied by the warranty card.

Legible signature of the applicant

Company stamp