

NOTIFICATION OF WARRANTY CLAIM					
ORDERING PARTY:					
OKBEKING PAKTI.					
(company name/address/PIN/contact p	person/phone)				
SITE/USER:					
(company name/address/PIN/contact p	person/phone)				
AUTOMATION AND CA	BLING				
DEVICE TYPE	SERIAL NO.	SAI	LES DATE	START UP DATE	DATE OF LAST INSPECTION
DDECISE DESCRIPTION	OF THE FALLET.				
PRECISE DESCRIPTION	OF THE FAULT:				
NOTES:					
directly related to the order. F started hour of service, howev	ver, not less than 900.00 PLN net. O	f 2.00 PLN net fo	or each kilometer	counted in both directions a	and 200.00 PLN net/person for each
151 of the General Tax Code ¹ .					
DATE AND SIGNATURE OF SERVICE TECHNICIAN			SEAL AND LEGIBLE SIGNATURE OF THE PRINCIPAL		





