



SMIPACK S.p.A
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MATERIAL REQUEST FORM

APPLICANT NAME - COMPANY			
MODEL MACHINE			
SERIAL NUMBER MACHINE			
COSTUMER NAME		WARRANTY	YES <input type="checkbox"/> NO <input type="checkbox"/>
REQUEST DATE			
PROBLEM DESCRIPTION		WORKS MADE TO IDENTIFY THE PROBLEM	

CODES PARTS	NOTES	N°	RETURNED
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>

P.S In the case of requesting spare parts under warranty, the form must be completed, with a description of the problem and a description of the job done to identify the defective part. The guarantee will not be recognized in the absence of a complete explanation. Better if you send photos or videos as an attachment.