RETURN AND COMPLAINT FORM



email ticket no. #

END CUSTOMER		PROFESSIONAL DEALER	
first and last name		company	
street, number		commission	
zip code, place		order number	
country		(SE-xxDAB)	
phone		first and last name	
email		street, number	
		zip code, place	
		country	
		phone	
		email	
Device information according to	type plate		
Date of initial use	product	serial number	purchase date
Supplied accessoires		Usage	
control unit		commercial	
heater		private	
sensor			
other			
Detailed error description. Which other products are installed?			
Documents attached			
Purchase invoice	Connection- / da		tial installation - Electrician invoice
I hereby confirm the installation and removal of the product by a qualified professional. In order to use our warranty a copy of the invoice of the executing electrical specialist and a copy of the purchase invoice must be attached. date, signature			
SENTIOTEC GMBH Internal note			
Entry date		SES	SA number

sentiotec GmbH

Wartenburger Straße 31 A-4840 Vöcklabruck www.sentiotec.com support@harvia.com Tel: +43 (0) 7672 / 22 900 - 50 Fax: +43 (0) 7672 / 22 900 - 80 opening hours:

Monday - Thursday: 8am - 4pm Friday: 8am - 12pm Saturday & Sunday: closed



Do you have any questions about the form?

You can find more information here.