

ATTENTION! Please note that your complaint can only be processed with a fully completed form.

Upon receipt of this form, we will contact you immediately.

Please enclose this document with the return of goods.

PERAQUA®

ADDRESS for RETURN SHIPMENT

Handelsstraße 8 | 4300 St. Valentin

Tel.: +43 7435 58 488-0

technik@peraquua.com

SERVICE FORM

CUSTOMER DATA

* mandatory

** subject to approval by Peraqua

Company name*

Contact person*

E-Mail contact person*

Phone number contact person

REPAIR AUTHORIZATION FOR MINOR REPAIRS:

A fee of **€125** will be charged for preparing a cost estimate – including inspection and fault analysis.

This fee will be waived if the repair is approved based on the cost estimate or in the case of a **warranty claim**.

Repairs costing up to and including **€125** will be **carried out automatically without prior consultation**, unless you select otherwise below (***). If the repair exceeds this amount, you will receive a cost estimate in advance.

Warranty cases are determined exclusively by the manufacturer.

*** Your choice (optional):

☐ I do not want automatic repairs up to €125. Please always provide a cost estimate in advance, regardless of the amount.

PRODUCT

Product description*

Invoice number & date of purchase*

Prod. No.*

Serial number*

Quantity

(for products without serial no., e.g. LED adagio)

Internal complaint/claim number

REASON FOR COMPLAINT*

☐ Operation failure ☐ Wrong goods delivered ☐ Goods incomplete

☐ Goods damaged ☐ Others:

CUSTOMER REQUEST**




- ☐ Credit note ☐ Repair / Cost Estimate ☐ Exchange
- ☐ Send missing items ☐ Others:

DETAILED DESCRIPTION OF THE ISSUE

Since when has the issue occurred?

When does the issue occur? ☐ Always ☐ Under certain conditions:

CONDITIONS OF USE

Please complete the following fields for products of these brands:   

Which medium*	Batch number*
Temperature of the medium/environment*	Can the device still be switched on?* <input type="checkbox"/> Yes <input type="checkbox"/> No
System pressure*	What is the main voltage?*
Duration of use*	Is the power supply present?* <input type="checkbox"/> Yes <input type="checkbox"/> No
Field of application*	Are control lamps lit?/Which ones?* <input type="checkbox"/> Yes: <input type="checkbox"/> No
Indoor or outdoor use*	Is any noise audible, and how can it be described?*

ATTACHMENTS:

- ☐ Photos ☐ Invoice ☐

Signature

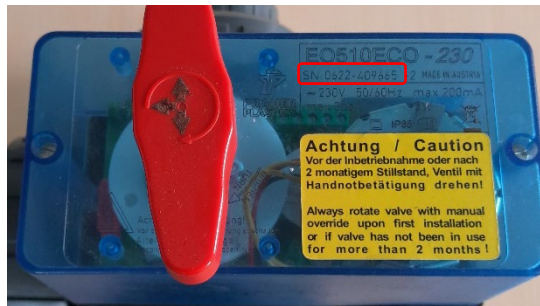
Place and date

HOW TO FIND THE ITEM NUMBER...

Automatic backwash valves



Ball valves



Manual backwash valves



Heat pumps

