



129 MONTÉE DE LIESSE, ST-LAURENT (QC) H4T 1T9  
 TEL.: 1-800-567-3620 FAX: (514) 382-7837

# SERVICE ORDER

\* BOXES WITH AN ASTERIX ARE MANDATORY TO FILL OUT

## COMPANY INFORMATION

\*Contact

\*Company

\*Address

\*City

\*Province

Postal Code

\*Telephone

Fax

## REQUESTOR IDENTIFICATION (For follow-up)

From  User  Dealer  Service Company

\*Contact

\*Company

\*Date

\*Telephone

## EQUIPMENT IDENTIFICATION

\*Brand  \* Model n°  \*Date of purchase

\*Serial n°  \*Where was this equipment purchased?

**DISCLAIMER: THERE ARE PAYMENT PROCEDURES TO FOLLOW FOR ANY EQUIPMENT NO LONGER UNDER WARRANTY**

### \* PROBLEM DESCRIPTION

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**NOTE: ANY FORM THAT IS INCOMPLETE, INACCURATE OR DOES NOT COMPLY WITH REQUIREMENTS AND LIMITATIONS WILL BE REJECTED AND RETURNED WITH AN EXPLANATION.**

## DISTEX ADMINISTRATION ONLY

### SERVICE CALL GIVEN TO

Is the machine under warranty?  Yes  No

Company

Telephone

Fax

Call dispatched by

Faxed  Time  Parts invoice n°

Contact

Compressor serial n°