



Sta.Ge HELLAS S.A.
CONTROL SYSTEMS FOR LIFTS

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RMA Form No

RMA FORM

CUSTOMER INFORMATION

Company Name :

Field of Activities :

Type of Company : Lift Installation/Maintenance Company
 Public Authority

VAT Number :

Address :

Telephone :

E-mail :

Serial Number of
Product S/N:

Lift Controller S/N:

Product Type :

Project :

Your ELEVATORS GENIUS Partner

Problem Description

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By sending this form, you state that you agree with the warranty conditions

Stamp & Sign