

## **Covering letter**

Date:

Please send it to <u>aftersales@wikus.de</u> in advance and attach the original return note on the outside of the parcel.

Customer no./-name:	Contact person:	Department:
Street:	Zip Code/City/Country:	Phone:
E-mail:	End customer no.(if available):	

WIKUS-order no.:
Deliverv note no.:

Invoice Date: Customer complaint no.:

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Pos.	Article no./ quality	Dimension (mm)	Tooth pitch (tpi)	Length	Position of customer order	Quantity delivered	Claimed quantity
1							
2							
3							

## **Application data**

Pos.	1	2	3
Blade breakage			
Deformation of backing material			
Wrong delivery			
Short blade life			
Long cutting time			
Bad cutting surface			
Irregular movement of the blade			
Welding seam breakage			
Deflection			
Tooth breakage			
Other complaint reasons			

Instant	of failure		
Pos.	1	2	3
Material no.			
DIN description			
Hardness (HB,HRC,HV)			
Strength (N/mm <sup>2</sup> )			
Dimension (mm)			
Cross-section (mm)			
Clamping (single,layer,bundle)			
Brand of saw machine			
Type of saw machine			
Cutting speed Vc (m/min)			
Feed rate Vf (mm/min)			
Cutting time			
Oil content/coolant (%)			

## Other remarks:

## Shipping information (packaging data)

Kind of package:
Opening hours:
Phone/E-mail Contact person:

Dimension: Weight: Contact person for collection goods:

**ATTENTION:** If you are returning goods from a third country it is absolutely necessary to enclose the pro forma invoice (incl. value of goods and Germany as state of origin). We reserve the right to invoice freight charges in case of unjustified complaints.