

## Repair Consignment Note

Nouvag GmbH  
Repair Service  
Schulthaißstr. 15

78462 Konstanz/Germany

Customer number	
Name/company	
Contact person	
Street/Number	
Zip code /residence	
Phone number	
E-mail	
Please indicate alternative billing address if needed:	

Problem description:	
Product /serial number	
Date of purchase	
Delivery note number / bill number	

Please enclose a copy of the delivery note or bill in case of expected warranty repair.

- We agree that **Nouvag Dental-und Medizintechnik GmbH** provides our e-mail address to DHL or any other logistics provider to track the shipment via tracking number.

Please use the following e-mail address: \_\_\_\_\_

For the protection of our employees only cleaned and sterilized articles can be accepted if they have been in contact with body fluids. In case of missing certification, we reserve the right to reject the article or decontaminate the article at extra costs.

- We herewith certify, that the above article has been properly cleaned / decontaminated.

\_\_\_\_\_  
Date / signature / stamp