

PARTE DI ME

FIRENZE

REPAIR FORM

Add this form to the package that will be returned.

ORDER NUMBER:

(The order number can be found in your confirmation mail)

CUSTOMER DETAILS	
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NAME:	
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E-MAIL:	
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ADDRESS:	
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ZIP CODE + CITY:	
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COUNTRY:	
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IBAN / SWIFT:	
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ARTICLE DETAILS	
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BRAND NAME:	
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ARTICLE NUMBER:	
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DATE OF PURCHASE:	
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DESCRIPTION OF REPAIR

OTHER COMMENTS

* Details below will be filled in by Parte Di Me

CLIENT NUMBER:	
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REFERENCE NUMBER:	
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DATE:	
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WARRANTY:	
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QUOTATION: YES/NO	
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