



RECLAMATION FORM

1.0 PROJECT GENERAL INFORMATION:

PROJECT DETAILS	
OFFER/PROJECT NUMBER:	
DATE OF PURCHASE:	
RECLAMATION DATE:	

COMPANY DETAILS:	
Full company name:	
Address:	
Postal code and city:	
Country:	
Name and Surname of the	
person responsible:	
e-mail:	
Phone:	

2.0 RECLAMATION DATA:

LAMP NUMBER	LAMP POWER	LAMP CONDITION	LAMP DEFECT

Please take a picture of the lamp(s) in question and send it with this document.

Lamp picture enclosed: YES NO

Responsible person:

SES Lighting eligibility of the warranty claim

Contact:

Signature:





HOW TO FILL IN RECLAMATION FORM

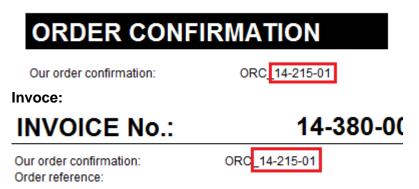
Please fill in ALL blank spaces and send the RECLAMATION FORM to <u>projects@ses-lighting.com</u>. Only with all needed data reclamation can be solved in the shortest time possible.

EXPLANATIONS TO FILLING IN

1.0 PROJECT GENERAL INFORMATION

<u>OFFER/PROJECT NUMBER</u> ... you can find this number on the offer, order confirmation and also on the delivery note and invoice.

Example: project number 14-215-01 is seen on: **Order confirmation:**



DATE OF PURCHASE is the invoice date.

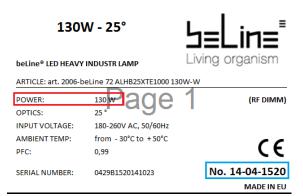
<u>RECLAMATION DATE</u>.. day of reclamation. It shouldn't be older than the sending date of this document.

<u>COMPANY DETAILS</u>.. all details of the company with contact information or the perosn responsible.

2.0 RECLAMATION DATA

<u>LAMP NUMBER</u>...Write the number that is written on the side label of the lamp (BLUE BOX)

<u>LAMP POWER</u>Write the power of the lamp that is written on the side label of the lamp (RED BOX)



LAMP CONDITION .. write only WORKING / NOT WORKING

<u>LAMP DEFECT</u>......write the state of the lamp and how it happened Example: LED MODULE NOT WORKING / ONE LED ROW NOT WORKING / LAMP NOT WORKING / BROKEN GLASS DUE TO / LAMP NOT RESPONDING / descrie the state of lamp and how it happened.