

CUSTOMER & INVOICING INFORMATION

System location _____

Delivery address _____

Invoicing address _____

Contact person _____

Phone number _____

SYSTEM INFORMATION (fill in what is known)

Device model (e.g. Pro 6 SR tai Promiss) _____

Year of installation (is written on electric cabinet's door) _____

Pipe material _____ PVC _____ METAL

FILL HERE IF SYSTEM USED FOR NORMAL INDOOR CLEANING

Inlet valve type (front/box/flat/floor) _____

Inlet valve opening method (key hook/turn key/finger open) _____

Inlet valve material (plastic, stainless, painted metal [color]) _____

FILL HERE IS SYSTEM USED FOR INDUSTRIAL CLEANING

System start type _____ inlet valve (microswitch) _____ push button

Inlet valve model description + diameters) _____

Vacuum hose type _____ Ø32/35 mm _____ antistatic
 _____ Ø38/41 mm
 _____ Ø50/52 mm

SUPPLIES TO ORDER

Item number and name	quantity

ADDITIONAL INFORMATION