

	Regeneration Form		Form no QF-32	
			Issue date	16.07.2007
Complainer (full address):		Reclamation no. <i>(to be completed by manufacturer)</i>	Receiving date <i>(to be completed by manufacturer)</i>	
Contact person:	Tax Identification Number:	tel.:	fax:	e-mail:

Product name	Size <i>(b x s x t)</i>	length	u.m. <i>(units./rm)</i>	Scope of regeneration

*In case of stellit tipping or swaging – we should be informed about number of teeth and their location.
In case of adjusting – we should be informel about distance of spinning from gullet and high of spinning.*

ATTENTION: *Incorrectly filled out form won't be accepted.
If product is not qualified to regeneration it should be collected within 30 days, after this time product is scrapped.*

ATTENTION: *Ro-Ma Co. Ltd. does not take responsibility for regeneration products of other manufacturers.*

Date of performance
to be completed by manufacturer Customer's signature

Remarks
(to be completed by manufacturer)

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Date:..... Signature:.....