

Claim protocol no..... ___/___/___

I. Boiler's data

1. Boiler's number:	___/___/___	2. Boiler type:	<input type="checkbox"/> STANDARD	<input type="checkbox"/> SUPER	<input type="checkbox"/> ORLAN-W
3. Boiler's power:	<input type="checkbox"/> 18	<input type="checkbox"/> 25	<input type="checkbox"/> 40	<input type="checkbox"/> 60	<input type="checkbox"/> 80
4. Production date	___/___/___	5. Buying date	___/___/___	6. Date of first startup	___/___/___

II. Company data/user

1. Name of the company/user _____ _____ _____ 2. Address _____ _____ City _____ Zip Code _____ 3. Telephone _____ 3a. Telephone II _____	Please fulfill readable
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III. Reported service activity

IV. Carried out service activity			Time norm	
NO	Price list symbol		NO	SP

Only right fulfilled protocol will be a base payout	V. Settlement		Total time	NO	1.	<input style="width: 100%;" type="checkbox"/>		
			SP		2.	<input style="width: 100%;" type="checkbox"/>		
		Amount for activity NO (pos. 1 x current stake NO According pricelist.....)					3.	<input style="width: 100%;" type="checkbox"/>
		Amount for activity SP (pos. 2 x current stake SP According pricelist					4.	<input style="width: 100%;" type="checkbox"/>
					Diagnosis		5.	<input style="width: 100%;" type="checkbox"/>
Access (both ways) km.....x stake					6.	<input style="width: 100%;" type="checkbox"/>		

Total payment (pos. 3 + 4 + 5 + 6)

Serviceman remarks	User remarks
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Serviceman Signature	User Signature
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