



Return form

Please send the form to **info@wikus-austria.at** in advance.
Please fill in all areas / fields with a red star (*). Many thanks for your support

WIKUS customer order no. / position no.: *

WIKUS delivery note no.: *

No. of claimed blades / coils: *

Order placed with / supplied by: * WIKUS different dealer / supplier: _____

Customer / consignor *

Customer no.:

Customer name:

Street / no.:

ZIP code / city:

Country:

Contact person:

Phone / email:

Reason for complaint *

Damages on blade:

- Tooth tips
- Backing material
- Welding seam breakage
- Blade breakage
- Tooth breakage

Irregularities during sawing process:

- Strong vibrations
- Deflection
- Unstraight running of the blade
- Rough cutting surface
- Wavy cutting surface
- Premature wear
- Blade does not cut

Coils:

- Straightness deviation of material sold by the meter
- Coil bend
- Printing
- Corrosion

Delivery:

- Transport damage
- Wrong delivery
- Goods not received

Other / remarks

Dispatch information *

Type of packaging:

Contact person for pick up:

Dimensions:

Phone contact person:

Weight:

Email contact person:

Opening hours:

ATTENTION: In case of a return from a third party country, please attach the proforma invoice to the shipment (please mention goods value and EU-Austria as state of origin on it). In case of unjustified complaints we reserve the right to charge freight costs. Please consider the return conditions in our General Delivery Conditions.