



## REPAIR ORDER

Print and fill in this document and attach it to your room.

If you do not have a printer copy the information

Below on free paper.

### Customer information:

Last name & First Name:

Number and street :

ZIP code :

City :

Phone :

E-mail adress :

### Car Information

Model:

Year:

Serial number:

Mileage:

Breakdown :

**SHIP YOUR PART TO THIS ADDRESS**

**ELECTROTECH  
140A ROUTE DU POLYGONE  
67100 STRASBOURG  
FRANCE**