

SERVICE REQUEST FORM

Please complete this form and send to Belintra, Inc. by mail : info-usa@belintra.com.

Customer data

<i>Institution Name</i>		<i>Phone</i>	
<i>Street, number</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Last name</i>	<i>First name</i>	<i>Email</i>	

Product data

<i>Product description</i>		<i>Delivery date / reference</i>	
<i>Belintra article number</i>		<i>Product ID number</i>	
<i>Last name</i>	<i>First name</i>	<i>Email</i>	

Description of Service Request

Name and signature requestor

Date

As soon as we receive your service request, this will be handled. Please allow 48 hours turnaround time for your request to be processed.