



spol. s r.o., Kollárova 75, 036 01 MARTIN

MOBILE NONSTOP - SERVIS : 00421 903 802 659

SERVICING ORDER

Company (customer): _____

Address where the lifting equipment (crane) is situated: _____

Type of lifting equipment: _____ Production number: _____

Suspected cause of failure: _____

The user must provide the service safely lifting platform or scaffold on which will have safe access to all parts of the lifting equipment (crane).

Name of customer responsible person who will be present during the service and putting the lifting equipment (crane) into operation:

_____ mobile: _____

Name of customer responsible person who will ensure shutdown of lifting equipment (crane) for the duration of service:

_____ mobile: _____

The requirement of the customer to ensure the test load YES – NO with capacity

_____ kg

Securing admission into customer's plant:

Date: _____ Customer name (readable): _____

Signature: _____

**The completed servicing order form should be sent by fax. +421 43 4224816
or by e-mail zeriavy@kpk.sk**