

Application Form - Relocation of Measuring Machines

Customer Data

Company name:

Contact Person:

Phone number:

Email address:

The address of the relocation site (the place from which the machine will be transported):

Machine information

Machine Name / Type:

Dimensions of the machine (L/W/H):

Weight of machine:

Technical conditions

1. Is electricity available on site to check the operation of the machine?
If yes, please provide details (e.g. voltage, type of outlet):

☐ Yes ☐ No

2. Is air available on site to check the operation of the machine?
If yes, please provide details (pressure, type of connection):

☐ Yes ☐ No

Information about the transport road

3. Whether there are crashes on the transport road, such as:

- Thresholds? (details):

☐ Yes ☐ No

- Level differences? (details):

☐ Yes ☐ No

- Posts? (details):

☐ Yes ☐ No

- Narrow frames (specify width):

☐ Yes ☐ No

4. Is the transportation route provided and safe?
Details:

☐ Yes ☐ No

5. How will the machine be loaded onto the truck (e.g., ramp, lift, forklift?).

6. Do you have a forklift?	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Forklift load capacity:	
- Maximum fork length:	
Photo documentation	
7. Please include photo documentation of the transportation route (e.g., entrances, aisles, ramp, etc.).	
- Photo 1	
- Photo 2	
- Photo 3	
Working hours	
8. What are the working hours?	
9. Is it possible to work in the afternoon?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional comments	
Please write any additional comments on the execution of the order:	
Data confirmation	
I declare that the above information is true and complete.	
Signature of the authorized person:	
Date:	