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## INQUIRY FORM

Customer	Date
Address	Reference
Contact person	VAT-No.
Invoice address	
Shipping address	

Heat Exchanger			
Serial-No.			
Required parts	Tube bundle	Gasket set	Counterflanges shellside
	Bonnets/cover	O-rings	Counterflanges tubeside
	other:		
Remarks			

Insert all known data in the coloured fields!

Mark with a cross, add relevant data or insert additional information!