

Kundennummer: \_\_\_\_\_

Datum: \_\_\_\_\_

Firma: \_\_\_\_\_

Name: \_\_\_\_\_

Strasse: \_\_\_\_\_

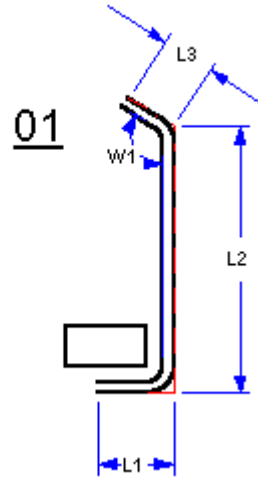
PLZ Stadt: \_\_\_\_\_

Telefon: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Anfrage  
 Bestellung



PFOSTEN 01

| Position      | 1                        | 2                        | 3                        | 4                        |
|---------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Anzahl        |                          |                          |                          |                          |
| Werkstoff     |                          |                          |                          |                          |
| Rohr          |                          |                          |                          |                          |
| L1 in mm      |                          |                          |                          |                          |
| L2 in mm      |                          |                          |                          |                          |
| L3 in mm      |                          |                          |                          |                          |
| Winkel in °   |                          |                          |                          |                          |
| Nachschleifen | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Anmerkungen/  
Mitteilung:

Unterschrift/Stempel: \_\_\_\_\_