

EMAIL HOTLINE-ORDER

hotline@swp-irma.com

Lfd. Nr.	Kd.Nr.	MA	ALFAPLUS® Release	Operating Sys.	SSV
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Company		
Contact Person	Phone	Fax
Problem in Program	Workstation	Department

Problem Description

Attachment — **Hardcopy(s)**

Frequency of Occurrence always occasionally first time

Problem Evaluation Function unclear Impediment

Date

Company Stamp/Signature

To be filled by SWP				
Rückantwort an Kunde	Datum			
Weitergabe an MA/Abt.	Datum		Dringlichkeitsstufe	
Zeitaufwand Min./MA	Test		Programm	
Installation	<input type="checkbox"/> Tel.	<input type="checkbox"/> Internet	<input type="checkbox"/> CD	<input type="checkbox"/> vor Ort
Abrechnung	<input type="checkbox"/> Ja	<input type="checkbox"/> Nein		