

# Customer Complaint Form



**SANOSIL**  
DISINFECTANTS FOR LIFE

Sanosil Ltd  
Bichtstr. 49, CH-8634 Hombrechtikon, Switzerland  
Phone: +41 55 254 90 54 Fax: +41 55 254 90 55 e-mail: info@sanosil.com

## Customer information

Company:

Address:

Contact name:

Telephone:

e-mail:

Date:

## Product information

Model:

Serial number:

Purchased from:

## Complaint information

Description of default:

Damages caused  
(if any):

Used liquid:

Segment (environment  
device is used):

Temperature (° C):

Relative humidity (rH):

Total operating hours (h):

Comments:



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SANOSIL LTD CH- 8634 Hombrechtikon Switzerland  
E-Mail: service@sanosil.com Internet: www.sanosil.com