Order Form – Special procedures

Company:……..

Name:……

Address:……

Postal Address:……

Switchboard:……..

Corporate ID:……..…

Contact:……Phone:……..

Email:……..

Consumables manufacturer:…… Product name:……

Weld type: ☐ Fillet weld single-pass ☐ Fillet weld multi-pass

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Consumables manufacturer:…… Product name:……

Weld type: ☐ Fillet weld single-pass ☐ Fillet weld multi-pass

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Consumables manufacturer:…… Product name:……

Weld type: ☐ Fillet weld single-pass ☐ Fillet weld multi-pass

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Consumables manufacturer:…… Product name:……

Weld type: ☐ Fillet weld single-pass ☐ Fillet weld multi-pass

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Signature Date and location

Administrative notes:……..

To be sent to:
info@svetsprocedur.se

Or to:
Svetsprocedur co.
Hebro-verken AB
Åredavägen 21
342 93 Hjortsberga, Sweden