

CLAIM FORM PACKAGING MATERIAL REKLAMATIONSFORMULAR PACKSTOFFE

YOUR DATA / IHRE DATEN

Company / Firma

Contact / Ansprechpartner

E-Mail

Date / Datum

Reference No. / Vorgangsnummer

CLAIM REFERENCE / REKLAMATIONSBEZUG

 Packaging material / Packstoff Endproduct (Cup, CartoCan®, CapSure® / Endprodukt (Becher, CartoCan®, CapSure®)

Article number / Artikelnummer

Article description / Artikelbezeichnung

Order number / Auftragsnummer

Delivery number / Lieferscheinnummer

Batch number / Chargennummer

Quantity / Menge

Drawing number / Zeichnungsnummer

Reel number / Rollennummer

CLAIM CATEGORY/ REKLAMATIONSKATEGORIE

 Transport damage /
Transportschaden Slitting /
Endbeschnitt Lid punching /
Deckelstanzung Splice /
Klebestelle Print /
Druck Machine /
Maschine Others /
Andere**In case the claim is caused by the machine:**

Machine No. / Maschinenummer

Machine type / Maschinentype

In case of damage, please attach pictures of the damaged goods as well as shipping and reel labels.
See also [Contact form \(hoerauf.com\)](https://www.hoerauf.com/contact)

CLAIM DESCRIPTION / REKLAMATIONSBESCHREIBUNG

Details