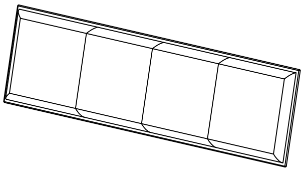
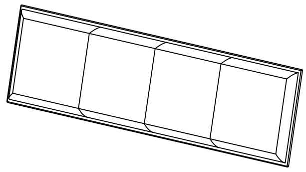
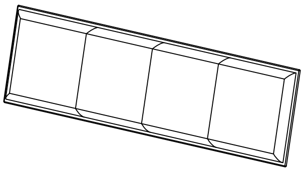
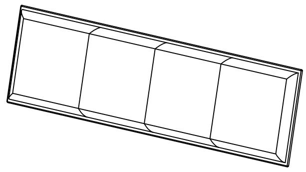
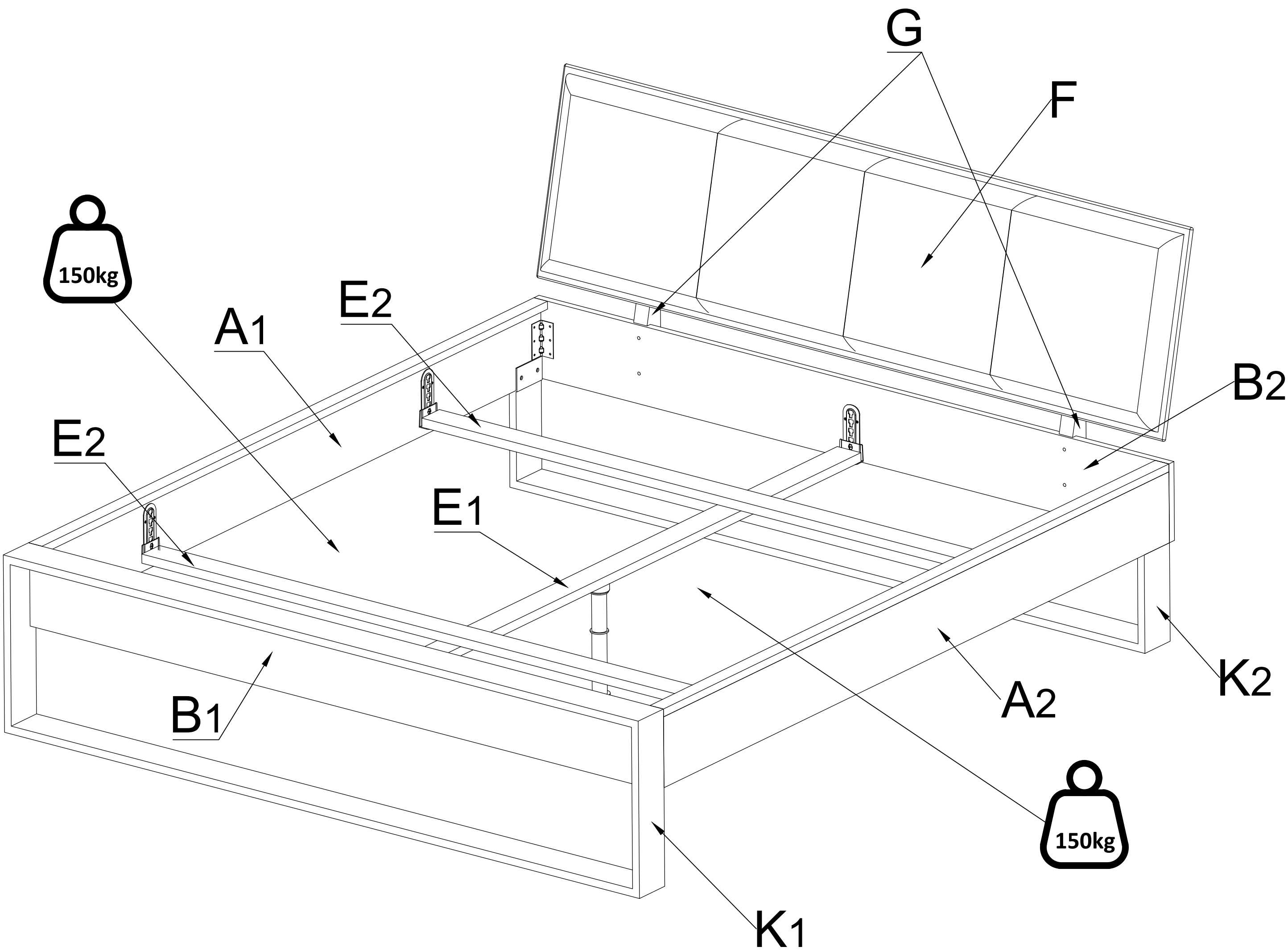
Servicekarte / Service card

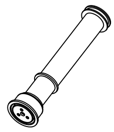
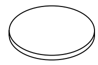
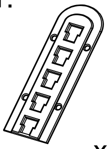
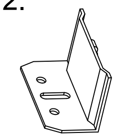
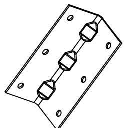
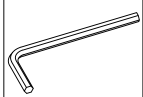
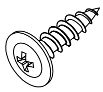
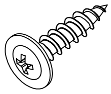
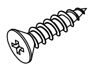
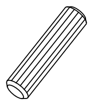
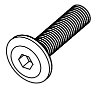
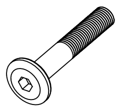
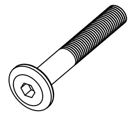
Modelname / Model name: Bett/Bed BE-0868	**Ausführung / Version: Wildeiche / Wild oak**
140x200  Model-Nr. / Model No.: 1017029	180x200  Model-Nr. / Model No.: 1017033
160x200  Model-Nr. / Model No.: 1017032	200x200  Model-Nr. / Model No.: 1017034

70104



DE: Sehr geehrter Kunde, Sehr geehrte Kundin!
Fehlt Ihnen ein Beschlagteil oder ist es Defekt? Kein Problem! Nutzen Sie unsere Servicekarte!
<u>Unser Direkt-Bestellservice für fehlende/defekte Beschlagteile:</u>
Kontaktieren Sie uns telefonisch unter Tel. +499503/5033-114 oder senden Sie uns eine E-Mail an kundendienst@3s-frankenmoebel.de. Bitte geben Sie dabei folgende Pflicht-Informationen an: -> Auftragsnummer, Artikelnummer, Nummer des Beschlagteils, fehlende/defekte Menge, und den Grund der Beanstandung, ob es sich um ein defektes oder fehlendes Beschlagteil handelt. Tragen Sie die benötigte Menge ein. Mailen Sie uns die vollständig ausgefüllte Servicekarte zu, um die Bearbeitung zu ermöglichen. Für andere Beanstandungen / Beschädigungen an Ihrem Möbelstück wenden Sie sich bitte direkt an Ihr Möbelhaus.

EN: Dear customer!
Are you missing a fitting part or is it defective? No problem! Use our service card!
<u>Our direct ordering service for missing/defective fitting parts:</u>
Contact us by telephone on +499503/5033-114 or send us an e-mail to kundendienst@3s-frankenmoebel.de.
Please include the following mandatory information: -> Order number, article number, number of the fitting part, missing/defective quantity, and the reason for the complaint, whether it is a defective or missing fitting part. Enter the required quantity.
Mail us the completed service card to enable processing.
For other complaints/damage to your furniture, please contact your furniture store directly.

No.		Part	Qty
13.	Stützfuss		x1
12.	Filz/Felt		x6
1.			x6
2.			x6
3.			x2
4.	SW 4		x1
5.	4,2x16		x12
6.	4,2x19		x6
7.	4x16		x27
8.	Ø8x32		x4
9.	M6x15		x8
10.	M6x35		x4
11.	M6x55		x12

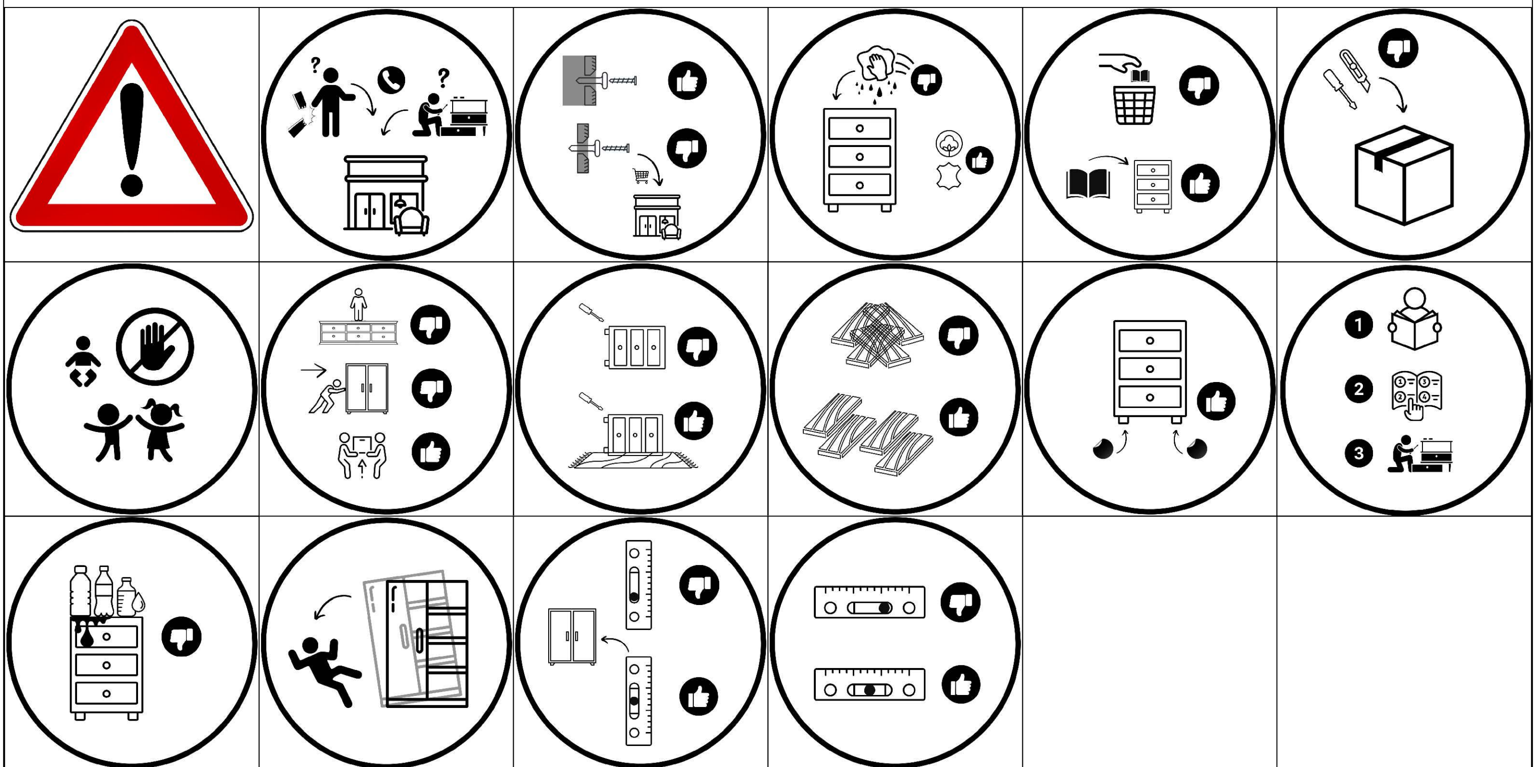
Grund der Beanstandung:
reason for complaint: ______________________

Name:
name: ______________________

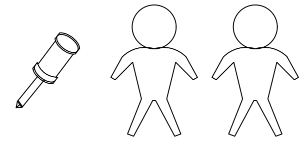
Strasse:
street: ______________________ **Haus Nr.:** house number: __________

Postleitzahl:
postal code: __________ **Ort:** place: ______________________

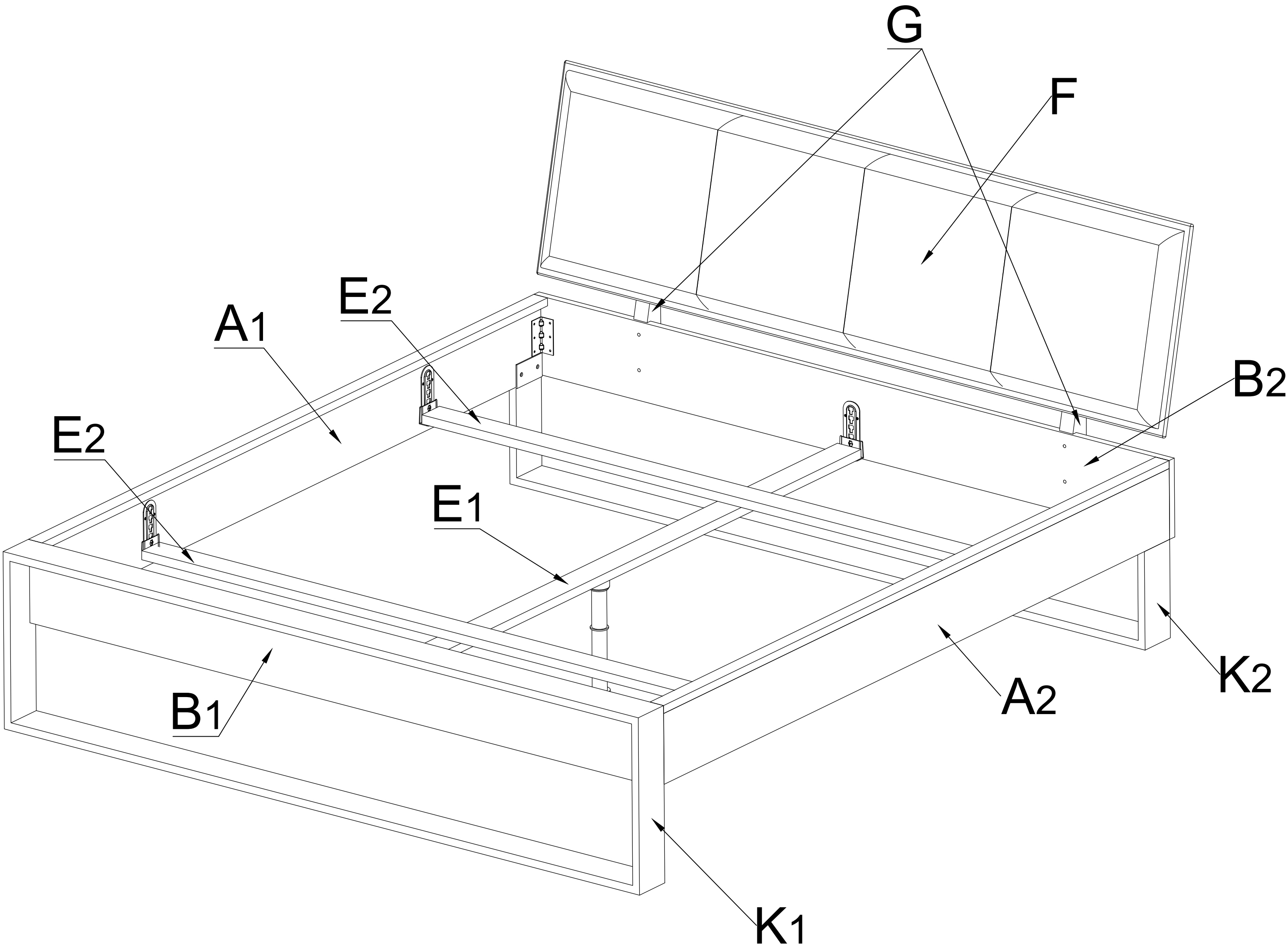
Telefonnummer:
telephone number: ______________________

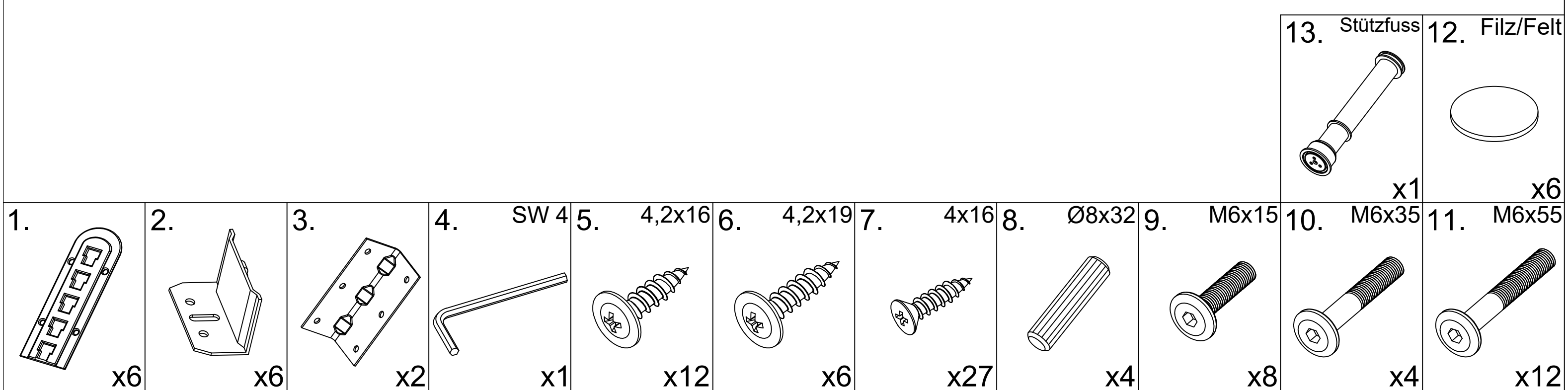


NL PL CZ FR SI SK HU

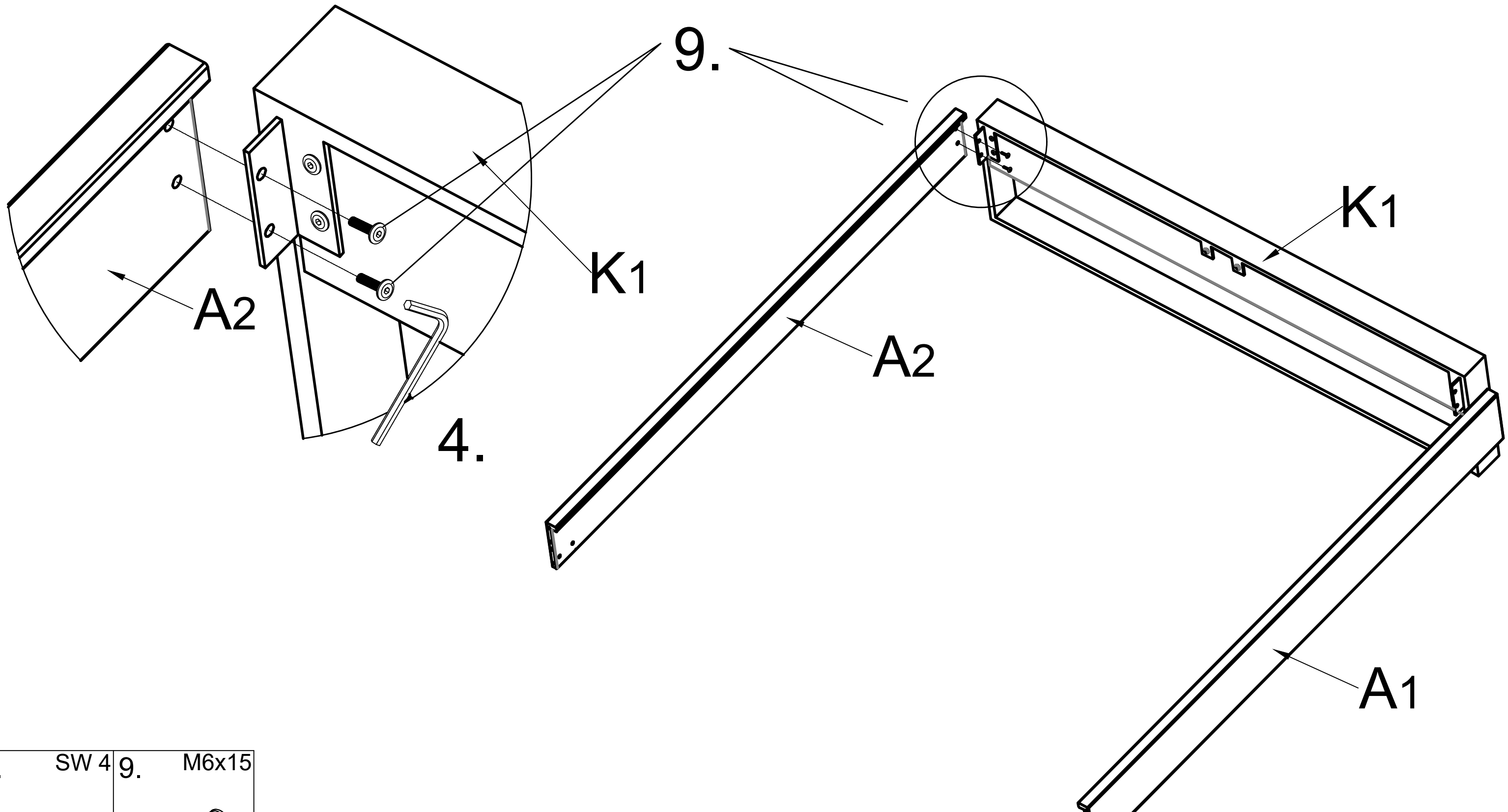


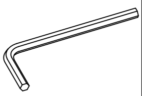
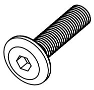
90 Minuten


G
F
E2
A1
B2
E2
E1
K2
A2
B1
K1

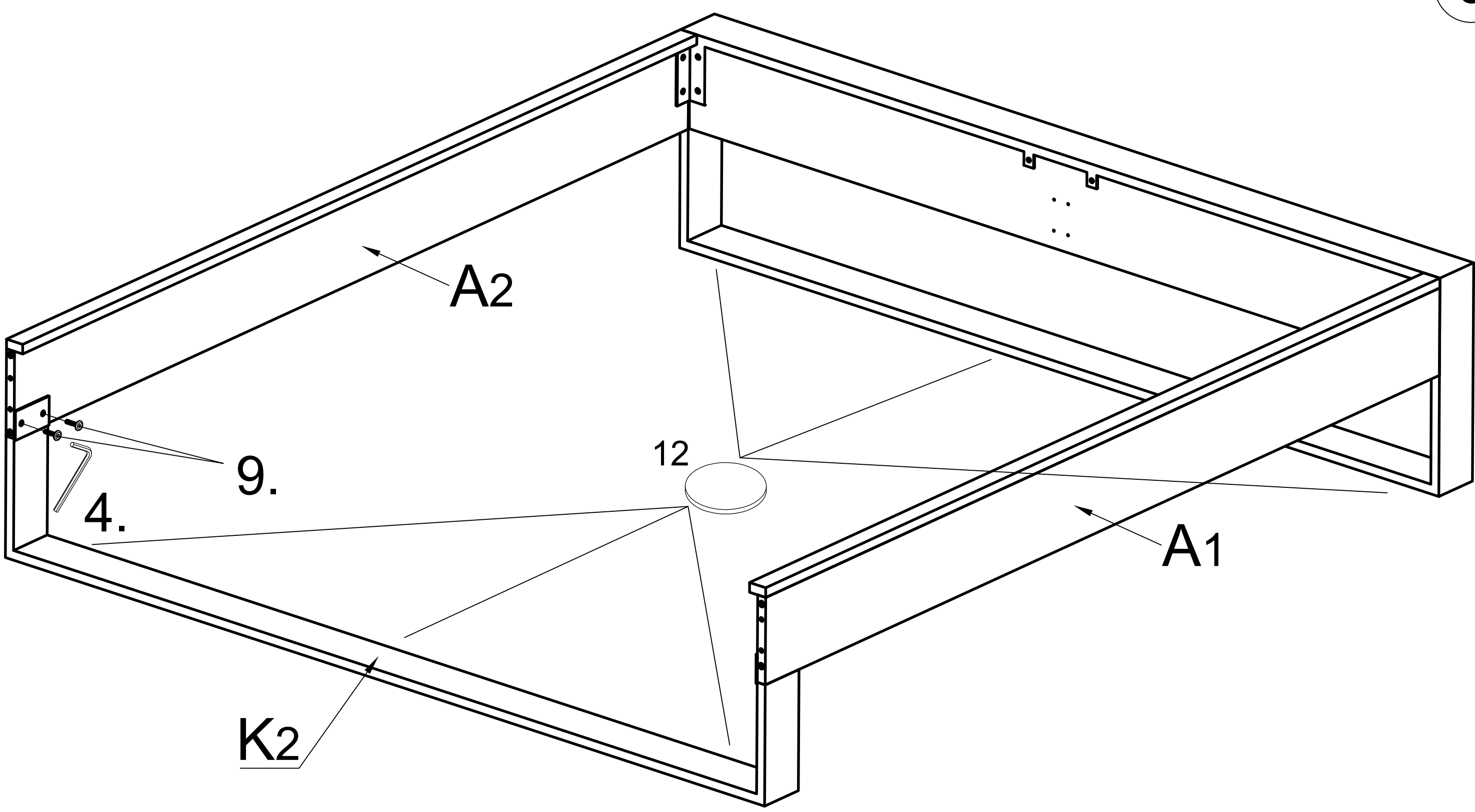

13. Stützfuss
x1
12. Filz/Felt
x6
1.
x6
2.
x6
3.
x2
4. SW 4
x1
5. 4,2x16
x12
6. 4,2x19
x6
7. 4x16
x27
8. Ø8x32
x4
9. M6x15
x8
10. M6x35
x4
11. M6x55
x12

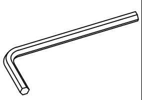
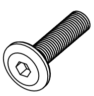
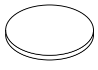
2



4. SW 4	9. M6x15
 x1	 x4

3



4. SW 4	9. M6x15	12. Filz/Felt
 x1	 x4	 x6

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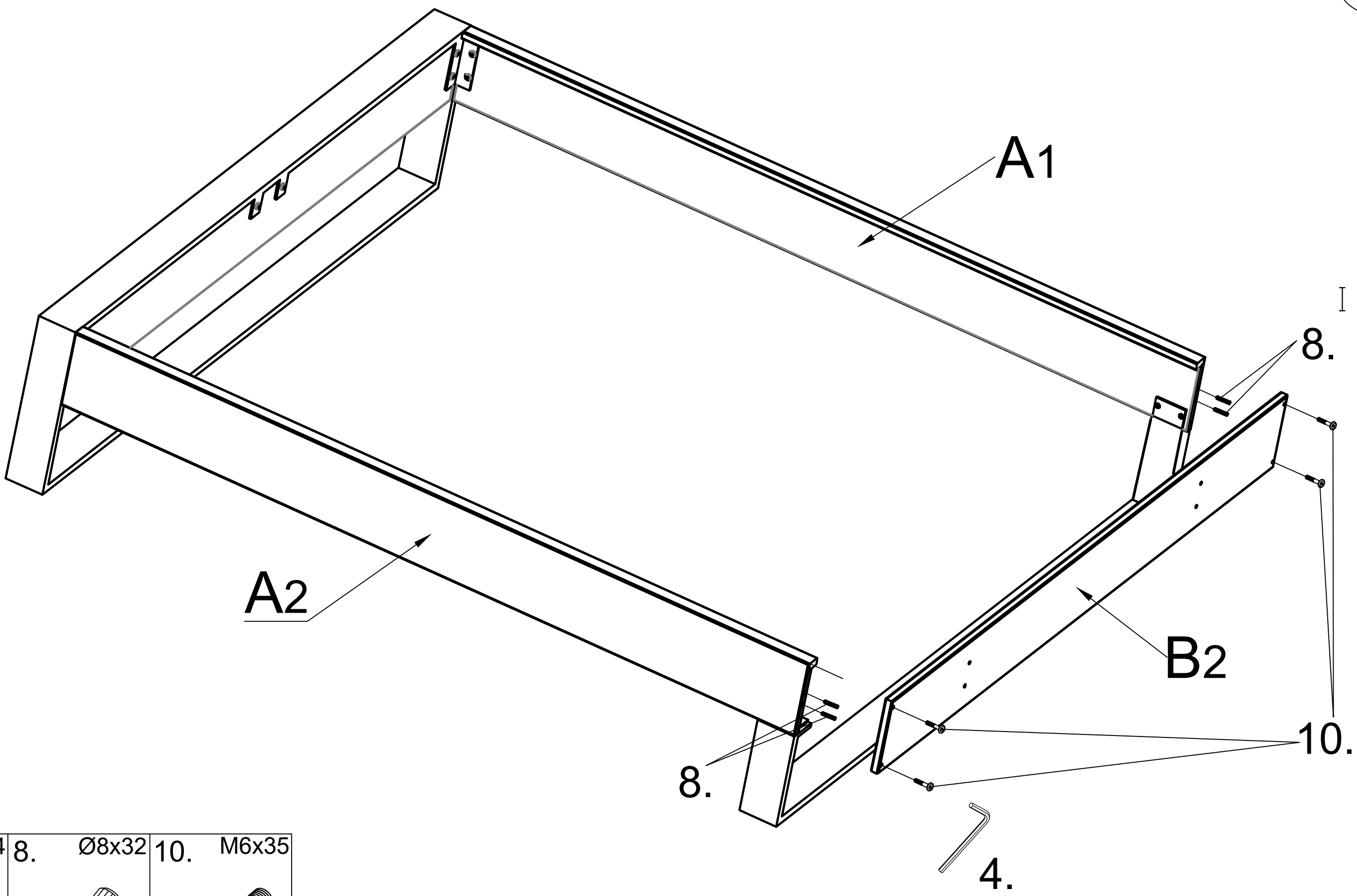
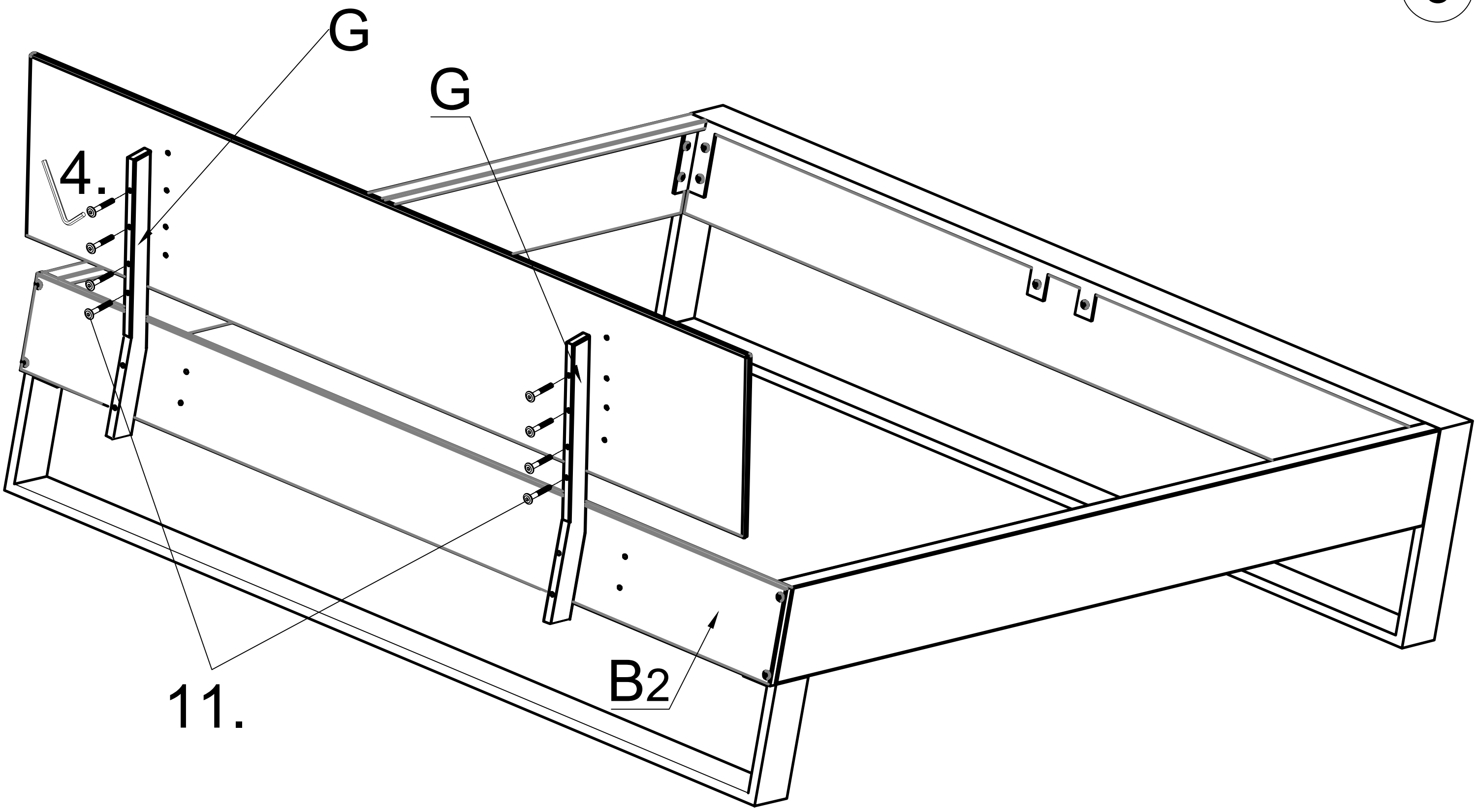


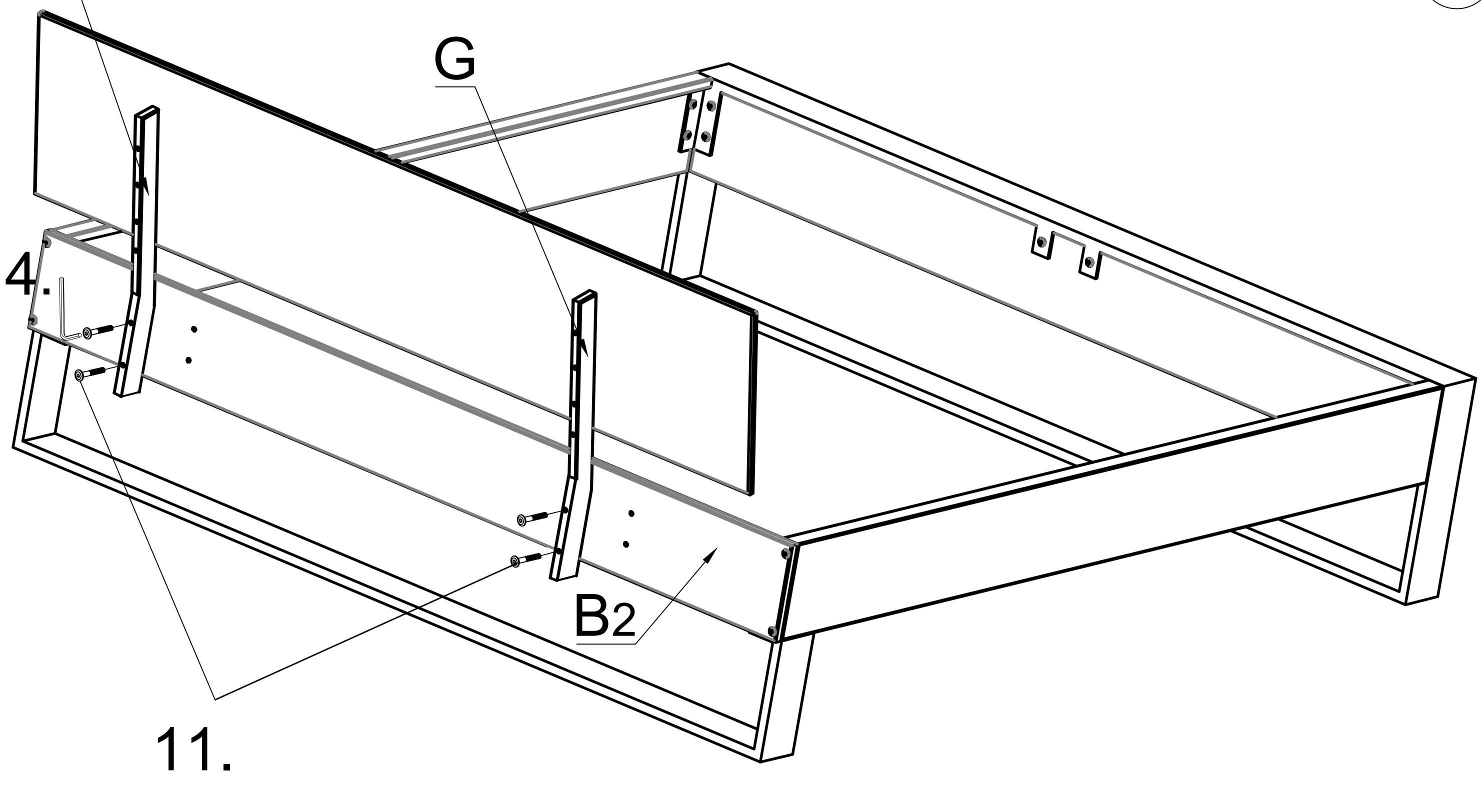
4. SW 4	8. Ø8x32	10. M6x35
x1	x4	x4

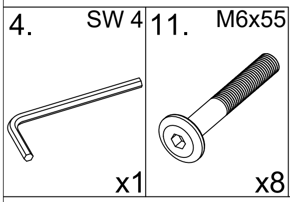
5



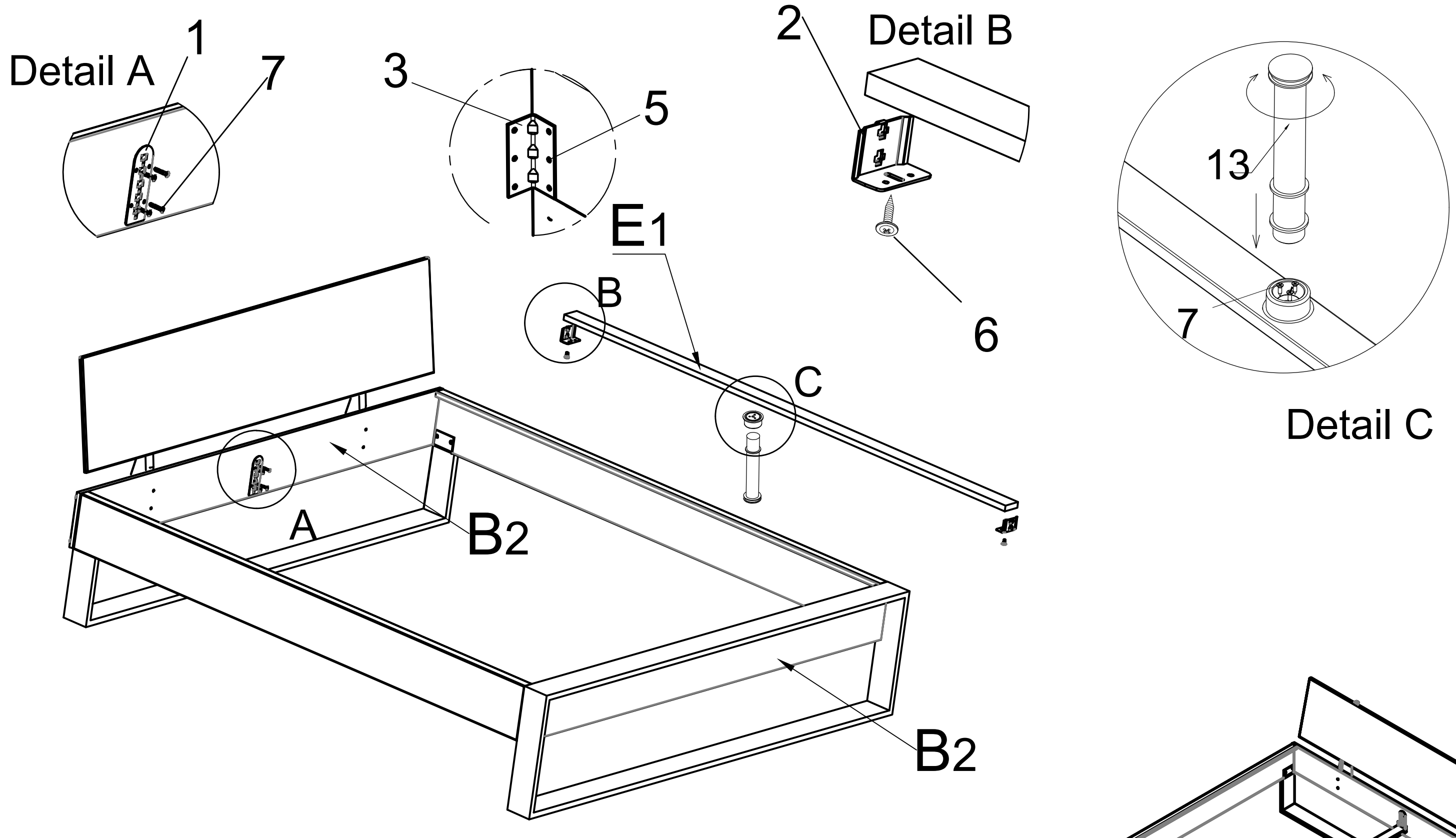
4. SW 4	11. M6x55
x1	x8

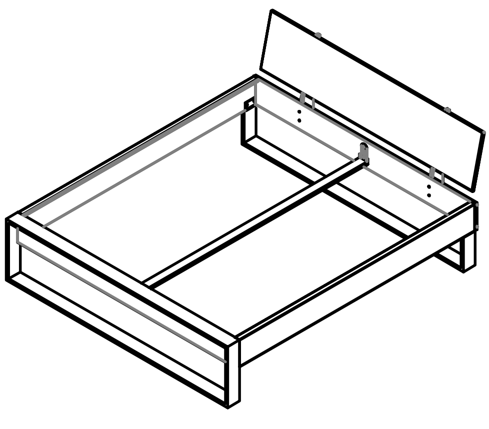
6

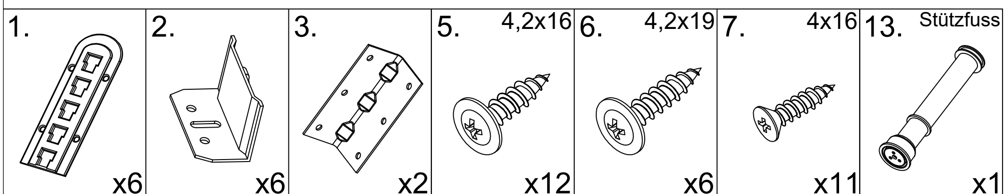

G
G
4.
B2
11.

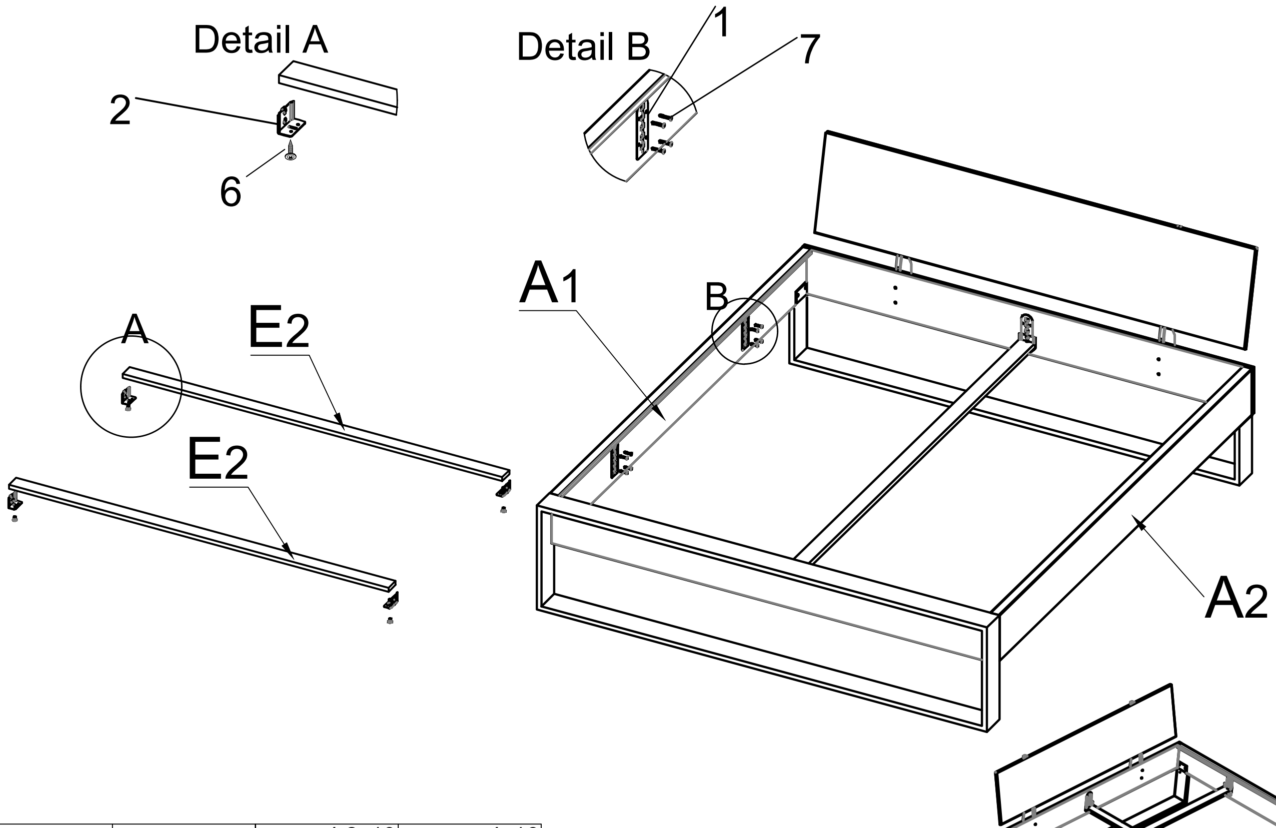

4.
SW 4
x1
11.
M6x55
x8

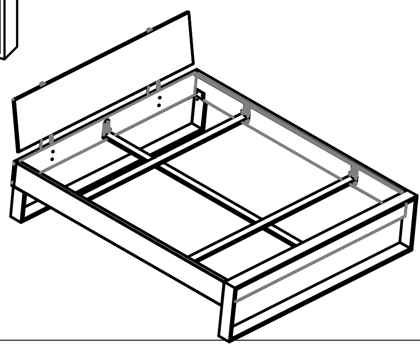
7


Detail A
1
7
3
5
2
Detail B
6
E1
B
C
13
7
Detail C
A
B2
B2




1.
x6
2.
x6
3.
x2
5.
4,2x16
x12
6.
4,2x19
x6
7.
4x16
x11
13.
Stützfuss
x1





1. x6	2. x6	6. 4,2x19 x6	7. 4x16 x11