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| **Nazwa zleceniodawcy:**  | **Osoba kontaktowa:** |
| **Adres:** | **Telefon, email:** |

Zlecenie nr……………… / data………….…..

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| **Lp.** | **Typ i nazwa narzędzia** | **Średnica** | **Rodzaj czoła** | **Ilość ostrzy** | **Ilość szt.** | **Pokrycie narzędzia** | **Typ powłoki / nazwa / twardość obrabianego materiału** | **Usługi dodatkowe** | **Uwagi** | **Nr. karty****(wypełnia FANAR)** |
| 1 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 2 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 3 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 4 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 5 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 6 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 7 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 8 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 9 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 10 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 11 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
| 12 |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
|  |  |  |  |  |  | [ ]  **TAK** |  |  |  |  |
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adres wysyłki: (jeżeli jest inny niż zleceniodawcy) …………………………………………………………………………………

**podpis zleceniodawcy**

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