

V.A.T Reg. 4890179734  
Tel: 010 590 0609  
Tel: 0877200245/6

Co.Reg.1998/024506/07  
Fax: 011 826 4123  
Fax: 0866340803

Customs code: 01650121  
Tel: 011 826 6742  
Email: [Jennifer@scotsmansa.co.za](mailto:Jennifer@scotsmansa.co.za)

Unit 4, Lakeview Business Park, 8-10 Yaldwyn Road, Jetpark / P.O.Box 30072, Jetpark, 1467

## REQUEST FOR SERVICE / REPAIRS

Please complete and return to Scotsman Ice Systems by fax or e-mail to:  
011 826 4123/086 634 0810/workshop@scotsmansa.co.za

**ALL REPAIRS ARE CARRIED OUT ON A C.O.D BASIS** - A PRE-DEPOSIT OF R1000.00 (incl. VAT) MUST BE PAID INTO OUR ACCOUNT PRIOR TO US GOING OUT TO SITE, covers traveling with in a 50km radius of Jetpark as well as the first hour labour. If you agree that we may uplift your unit to service in our workshops this call out fee will fall away, and a collection and delivery fee will be charged instead.

Traveling to outlying areas (Including. Pretoria) will attract a further traveling cost of R5.50/km excl. VAT.

Any other charges will be quoted and an invoice will be issued on completion of the job. This must be paid in cash on site.

**All our work is covered by warranty.**

Please note that this form does **NOT** allow for the work to be carried out under warranty.  
Any claim for **warranty** must be reported as such and the correct forms will be sent for completion.

Name and telephone no. of person reporting the fault.	
E-mail address to correspond:	
Name and number of person responsible to pay the Repairs / Service / Call out	
Name of establishment: i.e. Restaurant / Bar / Hotel / Store / Private House	
Address where machine is in operation	
Contact name of person where machine is in operation	
Telephone number of where machine is in operation	
MODEL NO. of machine	
SERIAL NO. of machine	
Date of installation (month and year)	
Reported fault or description of symptoms.	
Acceptance of our terms and conditions of service, and agreement to pay invoice on presentation	Name: _____ Signature: _____ Date: _____

**BANK DETAILS:** First National Bank, Branch code: **254-005**, Account No: **62006968369**  
**REFERENCE FOR PAYMENT MUST BE YOUR CELLPHONE NUMBER**

Managing Director: **S.D. Mackinnon**

Director: **F.Garbin ( Italy)**