

SERVICE FORM

Oden Electric Actuators



Company:

Contact name:

Date of return:

Product

P30 P30EX P50 P220 P500

Serial No. Valve Manufacture

Actuator Module Turning Linear Valve Type No.

Description by customer:

Result of examination:

Electronics SN.

Service report:

New Electronics SN.

Guarantee service

YES NO

Settings controlled and approved by:

Date: _____

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