

COST EVALUATION / REPAIR ORDER JACKET 181.3

DEALER DATE: ____/____/200__

1. INSTRUCTIONS for DEALERS

OY TEEMA LINE LTD. KUTOMONKUJA 2E1, FI-30100 FORSSA, FINLAND
TEL/FAX: +358-3-424 6 2700/4246 2718 email: info@thune.fi

TL DATE: ____/____/200__

A. PLEASE, NOTICE: DEALER MUST ALWAYS FILL IN **ALL CURSIVE TEXT AREAS**.
B. NO REPAIRS/RETURNS ACCEPTED WITHOUT **RETURN SHIPMENT NUMBER** FROM Oy TL Ltd
C. IF INFORMATION UNCLEAR/INCOMPLETE REPAIR IS ON RESPONSIBILITY OF DEALER, ONLY.

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TL **RETURN SHIPMENT NUMBER**, ONLY, PLS!

2. PRODUCT/SHOOTER/DEALER IDENTIFICATION

SHOOTERS NAME (BLOCK LETTERS, PLEASE!):	SHOOTER'S	WHEN ORDERING	NOW
DEALERS NAME (BLOCK LETTERS, PLEASE!):	WEIGHT:	kg	kg
SHOOTERS AGE IF UNDER 20 YEARS .	HEIGHT:	cm	cm

JACKET REPAIR PANTS REPAIR, TOO

JACKET PROD. NO / PANTS PROD. NO

JACKET MODEL

3. PAYMENT IDENTIFICATION

I WANT REPAIR COST EVALUATION ☐

REPAIR TO BE PAID BY DEALER ☐

GUARANTEE REPAIR, (Max 1 year old) ☐

TL LTD. REPAIR COST EVALUATION

WORK: ____ h a' ____ EUR + MATERIAL: ____ EUR. TOTAL: ____ EURO

WHY GUARANTEE? _____

4. PREVIOUS REPAIR(S) IDENTIFICATION

REPAIRED BEFORE: NO ☐ or YES ☐ BY TL LTD, DATE: ____/____/____, or ELSEWHERE, DATE: ____/____/____

HOW REPAIRED?
PLS, EXPLAIN ON
SEPARATE FORM!

5. REPAIR INSTRUCTION & PHOTOS OF PROBLEM

SHOOTING UNDERWEAR & ARMS
IN SHOOTING POSITION, PLS!

PHOTO(S) ARE NORMALLY NEEDED! ENCLOSED: NO ☐ or PHOTO(S) NO/DATE/PLACE:



PROBLEM NOW:

MARK THE NEEDED
REPAIR IN FIG. IN cm
AND EXPLAIN BELOW.

MEASURES

OLD / NEW

DIFF.

JACKET
NOW

REPAIR
NEEDED

- around chest, maximum
- around waist
- around hips at maximum point
- around shoulder at Q-point
- around upper arm, maximum
- around arm below elbow, maximum
- from neck to Q-point
- from neck over Q-point to back of elbow point
- neck/Q-point/back of elbow point to end of fist
- from neck to waist
- total length from neck to end of fists with arms straight
- width between Q-points
- width of back
- middle of back/elbow point in standing pos.

6. PAYMENT CALCULATION (For TL LTD. Production Manager, only)

CHARGE WORK: ____ h x ____ = ____

MATERIAL: ____ TOTAL: ____

REASON(S) FOR REPAIR:

WORK & MTRL

SIGN

TIME

h min

OPENING

CUTTING

SEWING

FINISH/CONTR.

MTRL 1 ____ x ____

MTRL 2 ____ x ____

TOT MIN: ____ h

TOT MTRL: ____ EUR

7. SHIPPING INSTRUCTIONS

KORJ UUSINTA
UUSI TILAUS NB:

MAIL -AIR
-ECONOMY
GLS UPS
OTHER:

ADDRESS
IF NOT
DEALERS
OFFICE:

STREET: _____
ZIP/CITY: _____
COUNTRY: _____
PHONE/FAX /WORK/HOME/HANDY/EMAIL: _____