



PLEASE FILL IN ALL  
DETAILS ON THIS FORM  
AND SEND TO:

admin@tractioncharger.com

Please also send any  
relevant documents.



TRACTION CHARGER  
REPAIRS RETURN



CONTACT NAME

FIRST NAME

LAST NAME

EMAIL

PHONE NUMBER

ADDRESS (WHERE RETURN WILL BE SENT TO)

BUSINESS NAME / BUILDING NAME

ADDRESS LINE 1

ADDRESS LINE 2

CITY

REGION

AREA CODE

COUNTRY

UNIT SERIAL NUMBER (IF AVAILABLE)

UNIT TYPE (TICK BOX)

- |            |                          |            |                          |
|------------|--------------------------|------------|--------------------------|
| MPL50B     | <input type="checkbox"/> | BSU2-50    | <input type="checkbox"/> |
| MPL50 - LI | <input type="checkbox"/> | BSU2-125   | <input type="checkbox"/> |
| SPIC-50    | <input type="checkbox"/> | SSU2-50    | <input type="checkbox"/> |
| CDU-1      | <input type="checkbox"/> | CSU2-50    | <input type="checkbox"/> |
| DUO 12/24  | <input type="checkbox"/> | MPL10A     | <input type="checkbox"/> |
| MPL80      | <input type="checkbox"/> | MPL20A     | <input type="checkbox"/> |
| BSU3-125   | <input type="checkbox"/> | BSU4-50/50 | <input type="checkbox"/> |
| BSU2-90    | <input type="checkbox"/> | SSU2-50/S  | <input type="checkbox"/> |

PLEASE DESCRIBE THE ISSUE