ORDER FORM – MACHINING SOLUTIONS

DFS Order Administration Industriestraße 52-42 D-70565 Stuttgart		Company	Company/VAR/Reseller Name & Address		
		Compa	ny:		
		Addres	S:		
		City:			
E-Mail: of.dsis@cer	ZIP Cod	de:			
Subject: Purchase (Countr	y:			
Fax: +49 (711) 7825	Contac	t Person:			
		Phone/	'Fax:		
		E-Mail	Address:		
		P.O. Re	ference:		
I nood a DD/CE nach	kage for the following	Machino Tool			
·	_				
Machine:	Machine Type:	Controller:	Short De	scription of Kinematics:	
Content of the pack	(age:				
•	_				
 □ postprocessor only □ Controller emulator only OR □ direct controller integration only □ full package with □ postprocessor, controller emulator and 3D resource model 					
Please indicate:					
☐ Please provide the package with a temporary license for demonstration / benchmarks.					
The target_ID is	::		_ *)		
				ser price) is according	
to the quotation no. TPV of CENIT.					
The package is dedicated for the following end user location:					
The package is ded	Teated for the following	ing end user tocation	1.		
Company:					
Address:					
City:					
ZIP Code:					
Country:					
(Sales Agent Compa	((Name of Sales Agent Authorized Person)			
(Location, Date)	((Signature Sales Agent Authorized Person)			

*) please send the physical adress of the target PC or target server. For technical support see www.postprocessor.net and use our tool to read out the target_ID.

