

RECLAMATION

Date:

Client:

Site:

First name and surname:

Phone number and email:

Element type:

hollow core slab, wall element, beam, column, stairs, ribbed floor element, bridge element, foundation element, floor plate for flooring system, retaining wall element, balcony element

**Please just underline the element type or fill "x" before the element type*

Element(s) ID:

**Please mark exact element name(s)*

Deviation category:

delivery, assembly, element geometry, inserts, holes, kitting, visual, surface, other

**Underline the reason*

Possible solution:

**Please describe your preferred solution and the solution urgency*

Please send e-mail to: aare.lessuk@betoonelement.ee