

## Warranty Claim Form

## PHONE: 1-888-571-2627 FAX: 1-866-869-1493 customerservice@redmondwilliams.com

Date:		Custor	Customer Name:			
Customer Account #:		Case/	Case/Incident #:			
Distributor: Redn	nond/Williams Distributin	g, 5190 Timberle	a Blvd., Mississauga, ON L	5W 2S5		
Contractor Inform	mation:					
Address:						
City:		Provin	Province: Postal Code:			
Phone:		Fax:	Fax:			
Contact:						
Homeowner Infor	mation:					
Address:						
City:		Provin	ce:	Postal Code:		
Phone:		Fax:	Fax:			
Contact:						
Purchase Details	:					
Model Number:		Purcha	Purchase Date:			
Serial Number:		Install	Date:	Redmond Invoice #:		
Description of Pr	oblem/Service Call:					
Part/Model #	Description		Inv # Part Purchased On	QTY	Price	
	T BE BETLIBNED AND ACC		H A WARRANTY FORM			

ALL PARTS MUST BE RETURNED AND ACCOMPANIED WITH A WARRANTY FORM.

• Manufacturers have the right to refuse claims. Redmond/Williams Distributing is not responsible for any losses refusals may cause.

 $\bullet$  Copies of invoices, RMAs, photos of failed part/unit and or the part/unit itself may be required.

• Failure to produce any items required by the manufacturer may result in a rejected claim.