

# IQ LIFT WARRANTY CLAIM FORM

## 1 CONTACT DETAILS

|                  |                      |              |                      |
|------------------|----------------------|--------------|----------------------|
| COMPANY NAME     | <input type="text"/> |              |                      |
| COMPANY ADDRESS  | <input type="text"/> |              |                      |
| POST CODE        | <input type="text"/> | CONTACT NAME | <input type="text"/> |
| TELEPHONE NUMBER | <input type="text"/> | FAX NUMBER   | <input type="text"/> |
| EMAIL ADDRESS    | <input type="text"/> |              |                      |

## 2 MACHINE & FAULT DATA

|               |                      |                    |                      |
|---------------|----------------------|--------------------|----------------------|
| MODEL         | <input type="text"/> | MACHINE SERIAL NO. | <input type="text"/> |
| FAILURE DATE  | <input type="text"/> | REPORT DATE        | <input type="text"/> |
| FAULT DETAILS | <input type="text"/> |                    |                      |

## 3 FAULTY PART DETAILS

| PART NUMBER          | PART SERIAL NUMBER   | PART DESCRIPTION     | QUANTITY             |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

## 4 WARRANTY COMPLETION

WARRANTY REFERENCE NUMBER 

### INTERNAL USE ONLY

PART(S) SHIPPED:

WARRANTY COMPLETION DATE 

| PART NUMBER          | PART SERIAL NUMBER   | PART DESCRIPTION     | QUANTITY             |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

### IMPORTANT - PLEASE NOTE

1 Only one machine per claim form. 2 Faulty parts must be kept for a minimum of 90 days from date of warranty claim, and available for inspection by, or return to pop-up products limited if required. A copy of the claim form must be held with the part. 3 All parts with serial numbers to be included in 3. Above. 4 For further information please refer to the warranty policy & procedure.