

WARRANTY CLAIM

Please have your contractor inspect your unit and fill out the form below for warranty claim.

Model No.		
Serial No. – Outdoor Unit	Serial No.	- Indoor Unit
Dealer's Name	Date of Purchase	
Comments (Please describe the probl	ems, and the parts th	at need to be replaced)
Contact Informatio	n	
First Name	Last Name	
Address		
City	Province	Postal Code
Contact No.	Email	