

WARRANTY CLAIM FORM

Please complete this form in its entirety. Incomplete information may delay the credit/replacement process. Email completed form to <u>warranty@cbennett.net</u>

		1			
Date					
Dealer					
Contact					
Address					
City/State/Zip					
Phone Number					
Email					
P.O. #					
Original ORDER or INVOICE #					
		1			
Brand		Gas Type (LP, NG, etc.)		Unit Model Number	
Installation Date			Serial Number		
Replacement Part Number					
Reason for Replacement Please provide detail, not just "defective."					
Call Log # or Case #					
After troubleshooting with manufacturer technical support					
Please Check One:					
□Cre	edit Repair Parts	OR	☐ Send Replacement Part to Dealer		
Additional Information:					

This form may not be all inclusive. Additional information may be required dependent upon manufacturer specifications.

We will contact you if additional information is needed. Thank you!