

WARRANTY REQUEST - PRODUCT/SERVICE

Claim
Number

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Office use Only

PRODUCT DETAILS

Product Description: _____

Quantity: _____ Product Already Installed? YES / NO (please circle)

Fault/Issue: _____

Product Date Stamp: _____ Product Caster Stamp: _____ QC Stamp: _____

Images Supplied: YES NO If NO, provide explanation: _____

MERCHANT DETAILS

Place of Purchase: _____ Date of Purchase: _____

Contact Name: _____ PO/BPA Invoice No: _____

Address: _____

State: _____ Post Code: _____

Phone: _____ Fax: _____ Proof of Purchase Attached: Yes: No:

INSTALLER'S DETAILS

Company Name: _____ Licence No: _____

Contact Name: _____

Phone: _____ Mobile: _____

SITE/END USER DETAILS

Address: _____

Suburb _____ State: _____ Post Code: _____

Contact Name: _____ Phone/ Mobile/Fax: _____

No service will commence until this form is completed, signed and sent to BPA by fax/post/email incl. proof of purchase.

Important Information:

1. Service Plumber will assess the problem and inform the customer about their findings. If the fault is deemed a **installation problem or environmental issue** (i.e. debris in water supply), where the product is not a BPA product, or outside the warranty period, the consumer is responsible for payment of any works carried out by the service plumber.
2. A product fault which is not related to installation, will be rectified by BPA, however any such work can only commence after authorization to that effect was given to the service plumber by BPA in writing.
3. All installations should be carried out by a licensed plumber.

I have read and agree to the above conditions. Signed: _____

Date: _____ Print Name: _____

**Requests should be faxed to 1300 746 480 or
Posted to PO Box 728, BOTANY NSW 1455 or emailed to: bpa.warranty@johnsonsuiss.com.au**

Office Use
Only

Evaluation: _____

Action Required:

To Be Replaced

To be Credited

Supplied /Invoice Only

Authorised by : PRODUCT QUALITY Manager
Version : Version 1.5
Page: 1 of 1
Location: X:\Operations\FORMS\OP3001 - Warranty Service Request Form V1.5

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