

POSEIDON WARRANTY SERVICE REQUEST FORM

Please provide the following information. Service charges will apply for all issues related to installation defects. For a full understanding of your warranty please refer to the warranty conditions. Before any warranty services can be accepted the following information and requirements must be returned to: FAX: 02 9748 4735 or EMAIL: service@poseidonbk.com.au

Distributor: _____ PO No/Poseidon Invoice No.: _____

Product Name and Issue: _____

Customer Detail: Name: _____ Contact No: _____

Customer Address: _____

Purchase date: _____ Installation Date: _____

Installers Details: Name: _____

Phone Number: _____ License No: _____

Please be advised that warranty service will not proceed without the following documentation:

- A copy of your purchase receipt.
- A copy of the installation receipt containing the name of installer and license details.

Important Note: All products must be installed by a licensed tradesman (as per State and Territory Legislation). If this is not adhered to warranty service CANNOT be provided.

A call out fee of \$220+GST applied below
Cost of repair /replacement as \$100 per hour of part Thereof, naturally you will be advised prior, should you wish to proceed. **The above charged will apply where:**

- The product is not a Poseidon Product
- The product has not been installed by licensed plumber
- The product has not been installed as per installation instructions
- The issue is not a fault in manufacture
- The product has been damaged at installation stage

Authorization

I hereby authorize a charge in the amount indicated above to be made to my:

Visa _____ Master _____

Card Number: _____

Cardholders' Name: _____

Exp Date: _____ CCV: _____

Signature: _____

In signing this form, I/We acknowledge that terms and conditions associated with this service request. I/We fully understand these terms and conditions and agree to them in total. I/We understand there will be legal action against all related parties regarding unpaid charge per above surcharge instructions.

Print Name: _____

Signature: _____