

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 back to the warranty conditions. Before any warranty services can be accepted the following information and requirements must be returned to: FAX: 02 8706 3238 or EMAIL: service@poseidonbk.com.au

Date: _____

Address: _____

Contact Name: _____ Contact No: _____

Purchase date: _____ Installation Date: _____

Product Name or Description: _____

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.

Please provide an explanation of the problem you are experiencing:

A call out fee of \$120+GST applied below
Cost of repair /replacement as \$75 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 not been damaged at installation stage

In sign this form, I/WE acknowledge the terms and conditions associated with this service request. I/WE fully understand these terms and conditions and agree to them in total. I/WE fully understand there will be have legal action to against all related parties in regard of unpaid charge per above surcharge instructions.

Print Name: _____

Signature: _____