

WARRANTY CLAIM FORM

PROPERTY OWNER INFORMATION

Name:
Address:
Telephone:
Cell Phone:
Email address:

INSTALLATION COMPANY

Name:
Address:
Telephone:
Cell Phone:
Email address:

PRODUCT INVOLVED IN CLAIM

Pyroclassic IV	<input type="checkbox"/>
Pyroclassic Mini	<input type="checkbox"/>
Parts	<input type="checkbox"/>

PYROCLASSIC AGENT DETAILS (if applicable)

Name:
Address:
Telephone:
Salesman:

Proof of Purchase is required. Please provide copy of paid receipt

Please tick

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Fire Serial Number

Photographs are required for all warranty claims to help determine the environment and product defect. Please supply photographs from a variety of angles and close ups of the affected areas and product. Please number and explain view with each photograph	Number of photographs supplied	
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Please give a detailed description of the problem

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We will contact you if additional materials are required

OFFICE USE ONLY	Claim Number:
Quality Testing Required?	
Colour?	
Impact?	
Damage?	

Please return to Pyroclassic Fires Australia PTY Ltd , 234-238 Moorabool Street, Geelong, VIV 3220 or
info@pyroclassic.com.au