

# WARRANTY CLAIM FORM

(This form may be duplicated for future use)

This form must be filled out completely or no labor credit will be issued on Warranty repair.

Fax this form to:  
**Service Center Team**  
Residential Fax: (866) 232-6647  
Commercial Fax: (866) 374-3439

WARRANTY RETURN MERCHANDISE AUTHORIZATION (RMA) No.:

## CUSTOMER INFORMATION

Name:	
Address:	
City:	
State:	Zip:
Telephone Number:	
Email Address:	

Customer email is requested to allow Aqua Products to follow up with customer directly to ensure satisfaction with and timeliness of repair completed.

## SERVICE CENTER INFORMATION

Company:	
Address:	
City:	
State:	Zip:
Telephone Number:	
Fax Number:	
Email Address:	
Contact Person:	

Customer Signature:	Model Repaired:
	Unit Serial Number:
	Drive Motor Serial Number:
Date Unit Received at Service Center:	Pump Motor Serial Number:
Date Unit Service Repair Completed:	Power Supply Serial Number:

Nature of problem:


Warranty Items repaired or replaced:


**AQUA PRODUCTS**

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1.800.221.1750 [www.AquaProducts.com](http://www.AquaProducts.com)