

Warranty Registration Form

**MUST BE RETURNED TO PROMAC EQUIPMENT IMMEDIATELY
UPON RECEIPT TO INITIATE WARRANTY RECORD AND COVERAGE**

Model No.: _____		Serial No.: _____	
Invoice No.: _____		Dealer Name: _____	
Customer Name: _____			
Mailing Address: _____			
City: _____		Province/State: _____	Postal/Zip Code: _____
Telephone Number: _____		Email: _____	
Warranty (Delivered) Date: _____			

Dealer	Purchaser
<p>The machine was properly set up, adjusted and inspected before delivery. The following items were explained to the purchaser:</p> <ul style="list-style-type: none"> • Proper machine operation as shown in the operator’s manual. • The importance of safety and preventative maintenance. • Warranty for this machine. 	<p>The Purchaser hereby acknowledges that they have received, read and accept the Promac sales terms and conditions, and warranty repair guidelines.</p> <p>The Purchaser hereby further acknowledges that they have received and reviewed the operator’s manual for the above machine and understand the proper and safe operation as well as the applicable warranty outlined therein.</p>
_____ Signature	_____ Signature
_____ Name	_____ Name
_____ Date	_____ Date