

CUBO2 SMART Warranty Claim Form

Engineer Name:

Branch:	Warranty Clam Ref No:			
Customer Details:	Section 1			
Company: Address:	Site Name: Attn: Account Number: Order Number: (For replacement part) DOA? YES NO			
Faulty Item:	Section 2			
Description: Code No:	Model No: Date of Failure:			
Details of Failure:				
ENGINEER TO COMPLETE	Note: U/S will not do - full information is required or warranty will be rejected)			
Original Equipment:	Section 3 Replacement Item:			
Model Ref: Serial No(s): Invoice No: Customer Order No:	Code No: Despatch Date: Sale Order Ref: Invoice No:			



CUBO2 SMART Warranty Claim Form

System Details:				
ENGINEER TO COMPLETE (Note: Full information is required or warranty will be rejected)				
1) Failure symptoms & fault codes?				
2) Pipework details? (Total length & sizes)				
3) System Co2 charge?				
4) Number of evaporators?				
5) Evaporator(s) Make & Model?				
6) Type of EEV (Stepper/PWM)?				
7) Pre-charged with oil or had additional oil?				
IMPORTANT NOTES TO CUSTOMER 1 Faulty items must be returned within 21 days of failure. Returns will not be accepted without this warranty claim form. 2 It is the responsibility of the customer to return the goods to Beijer Ref UK & Ireland branches. Items will NOT be collected. 3 The Warranty Claim Form must be fully completed to ensure that your claim is accepted. 4 Warranty on compressors will be void if pipe terminations are not sealed (brazed). 5 Compressors are returned to the factory for report and tear down analysis and will not be returned. 6 All goods are supplied subject to Beijer Ref UK & Ireland Conditions of Sale. 7 Replacement items will be issued only against the customers confirmed order, and will be invoiced. 8 Credit will be issued for the value of the goods, subject to the warranty claim being accepted. 9 Rejected warranty product will be disposed of 12 weeks after customer notified. This form must be used for claiming credit for items returned under warranty. All relevant sections are to be completed by the customer where applicable. Items being returned must be labelled with the customers name and must also be accompanied by a copy of this form. Name of person completing form: Contact Telephone No:				
Signature:		Date:		
To sign the form electronically using Adobe Reader, please click the 'Sign Document' option within your PDF top toolbar. Alternatively please print out the form and sign manually.				
			Section 7	
Beijer Ref UK & Ireland	terminations sealed on compressors?	YES N		
Internal Use Only Are there	e scorch marks on returned PCB's?	YES N	0	
	ef UK & Ireland Cubo technical team contac	eted? YES N	0	