## Ice-O-Matic<sup>.</sup> Warranty Claim Form



Claim #	Service	Date	
(Service Bench #)	Invoice #	Repaired	
Fast Agent #	Special Authorization #	Distributor #	12983100

Model #

## Serial #

	SERVICE AGENT	CUSTOMER / END-USER		
Company		Customer		
Address		Address		
City		City		
State		State		
Zip		Zip		
Phone		Phone		
Email				
Contact Name		Contact Name		

	Problem Reported / Customer Request / Diagnosis of Problem (Need Details)							
	Service Preformed to correct the problem (Give Details, Leak Locations, etc)							
$\checkmark$	QTY	Part Number	Description	Lbr Hrs	Agent Part Inv #	Part Credit # / Date		

Total Labor Hours			Х	Hourly Labor Rate		=	
Travel	1 hr		Х	Hourly Labor Rate		=	
Miscellaneous Charge for Refrigerant Repairs Only (\$25 max)					=		
Reclaim/Recovery Fee (\$25 Air- Wtr or \$35 Remote)					=		
R404A		Lb	v	R404A = \$ 24.00 per L	.b.	_	
		Oz	Х	Prt # 6051055-01		=	
Total Labor Invoiced					=		

## **CLAIM and PARTS MUST BE SUBMITTED WITHIN <u>30 DAYS</u> FROM REPAIR DATE!**

Please Be Advised - This claim form will be processed using your service ticket number. Keep a copy for your records!