Ice-O-Matic



Warranty Claim Form

Claim # (Service Bench #)	Service Invoice #	Date 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..)

 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		Ш	
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 Prt#6051055-01			-				

Total Labor Invoiced

CLAIM and PARTS MUST BE SUBMITTED WITHIN 30 DAYS FROM REPAIR DATE!

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

Distributor: GULF ICE SYSTEMS, INC., 7790 Sears Boulevard, Pensacola, Florida 32514 Telephone: (850) 474-1784, Ext. 107 Fax: (850) 474-4858

Warranty Administrator: Extension 107
Email: warranty@gulficesystems.com