WARRANTY CLAIM FORM

INFORMATION REQUIRED (please complete all boxed sections identified blue)

1. **DATE OF CLAIM:**
2. **PRODUCT DESCRIPTION:**
3. **PRODUCT (MODEL):**
4. **SERIAL NUMBER (On key):**
5. **RETAILER NAME:**
6. **RETAILER REFERENCE:**
7. **ADDRESS OR BRANCH PURCHASED:**
8. **PLEASE CONFIRM IF THE SKUNKLOCK PRODUCT WAS PURCHASED IN STORE OR DELIVERED DIRECT**
9. **DATE OF PURCHASE:** **10. PRICE PAID:**

CUSTOMER NAME:

ADDRESS:

E-MAIL: **TELE NUMBER:**

REASON FOR WARRANTY CLAIM:

Proposed Action by SKUNKLOCK:

To process your claim clear photos and proof of purchase must be attached with ALL claims

Any authorized returns must be clean otherwise they will be returned without being inspected.
