HEAT KING

THAWZALL

WARRANTY CLAIM FORM

DIRECTIONS
1. Please print & fill out the form and email to **support@tamarack-ind.com.**
2. Take pictures and keep parts (they may be requested).

CUSTOMER INFO:

Company/Branch: _____
Address: _____
City/State: _____
Contact: _____
Phone: _____
Email: _____

MACHINE INFO:

Model: _____
Serial Number: _____
Hour Meter: _____
Delivery Date: _____
Failure Date: _____
PO# or Invoice #: _____

DESCRIPTION OF FAILURE AND RESOLUTION:

_____
_____
_____
_____
_____
_____

PART #	DESCRIPTION & INVOICE #	QTY	UNIT PRICE	AMOUNT

Labor		hours
Travel time		hours

Note: Claims must be completed and returned to Tamarack Industries within 30 days of repair. Parts must be held until judgement has been determined. I certify that all information is correct and accurate.

SUBMITTED BY: _____

DATE SUBMITTED: _____

Parts Total	
Labor Total	
Travel Total	
Grand Total	

Rate: Tamarack Labor Rate = $100/hr

Rate: Tamarack Travel Rate = $75/hr (MAX 3 Hours)

WWW.HEAT-KING.CA

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Winnipeg, MB
R3J 0V1

1-800-661-0304
1-204-885-5800

Tamarack Industries

WWW.THAWZALL.COM

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Alexandria, MN
56308

1-888-757-3545
1-320-759-1588