



MIGOMAG WELDING SUPPLIES

668 Somerville Rd

Sunshine Vic 3023

Phone: 03 9313 3100

Fax: 03 9312 4499

WARRANTY CLAIM FORM

Customer:

Repair Agent:

Job No:

Date of Claim:

Proof of purchase (Inv no.):

(A copy must be faxed/emailed with warranty claim form)

| MACHINE TYPE | MODEL NUMBER | SERIAL NO. |
|--------------|--------------|------------|
| | | |
| | | |
| | | |

| FAULT DESCRIPTION / PROBABLE CAUSE OF DAMAGE |
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| |

| SPARE PARTS USED / NEEDED | | | |
|---------------------------|----------|-------------|------|
| QUANTITY | PART NO. | DESCRIPTION | COST |
| | | | |
| | | | |
| | | | |

| LABOUR COST | HOURS | TOTAL COST |
|-------------|-------|------------|
| | | |

OFFICE USE ONLY –

APPROVED BY:

PRINT NAME

SIGNED

| | | | |
|-----------------------|--|-----------------|--|
| ACTIONED BY SUPPLIER: | | GOODS SUPPLIED: | |
|-----------------------|--|-----------------|--|