

CLAIM FORM

Customer:

Email:

Phone number:

Contact person:

Claim ID no.:

Product category:

Camera System

Feeding System

Barge

Thermolicer

FlexiBridge

Other

Important: Send the claim form to **warrantyclaims@scaleaq.com** to receive your ID number. **DO NOT** ship any items to us before receiving your ID.

Sales Order / Invoice no. / Project no.: (Must be filled in).

Equipment:

Serial number:

Error:

Cause of error:

When was the error detected?

Preferred action of approved claim (new parts, invoice, repair)

Image(s): Upload images on page 2.

FILLED IN BY SCALEAQ:

Feedback:

Reviewed by:

Warranty granted:

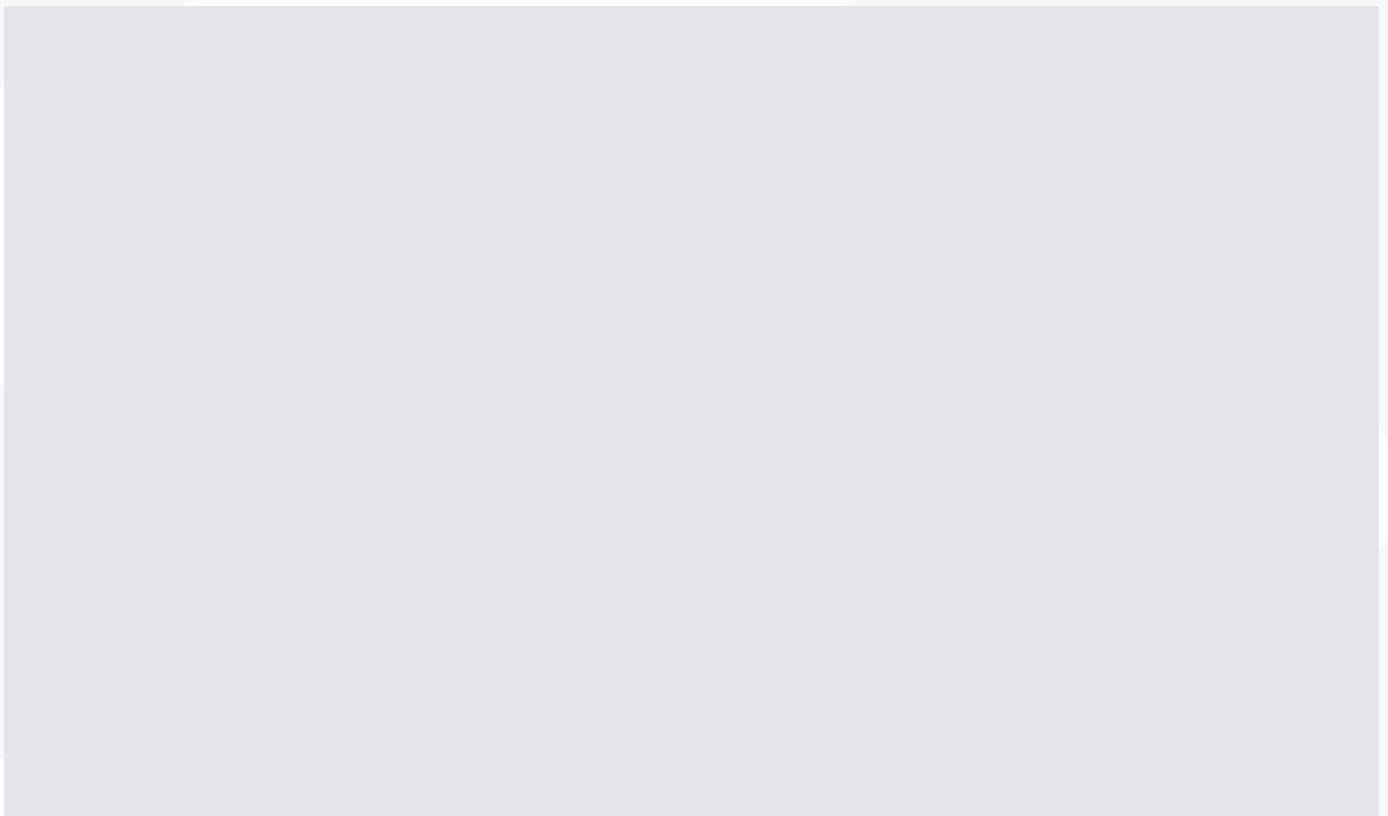
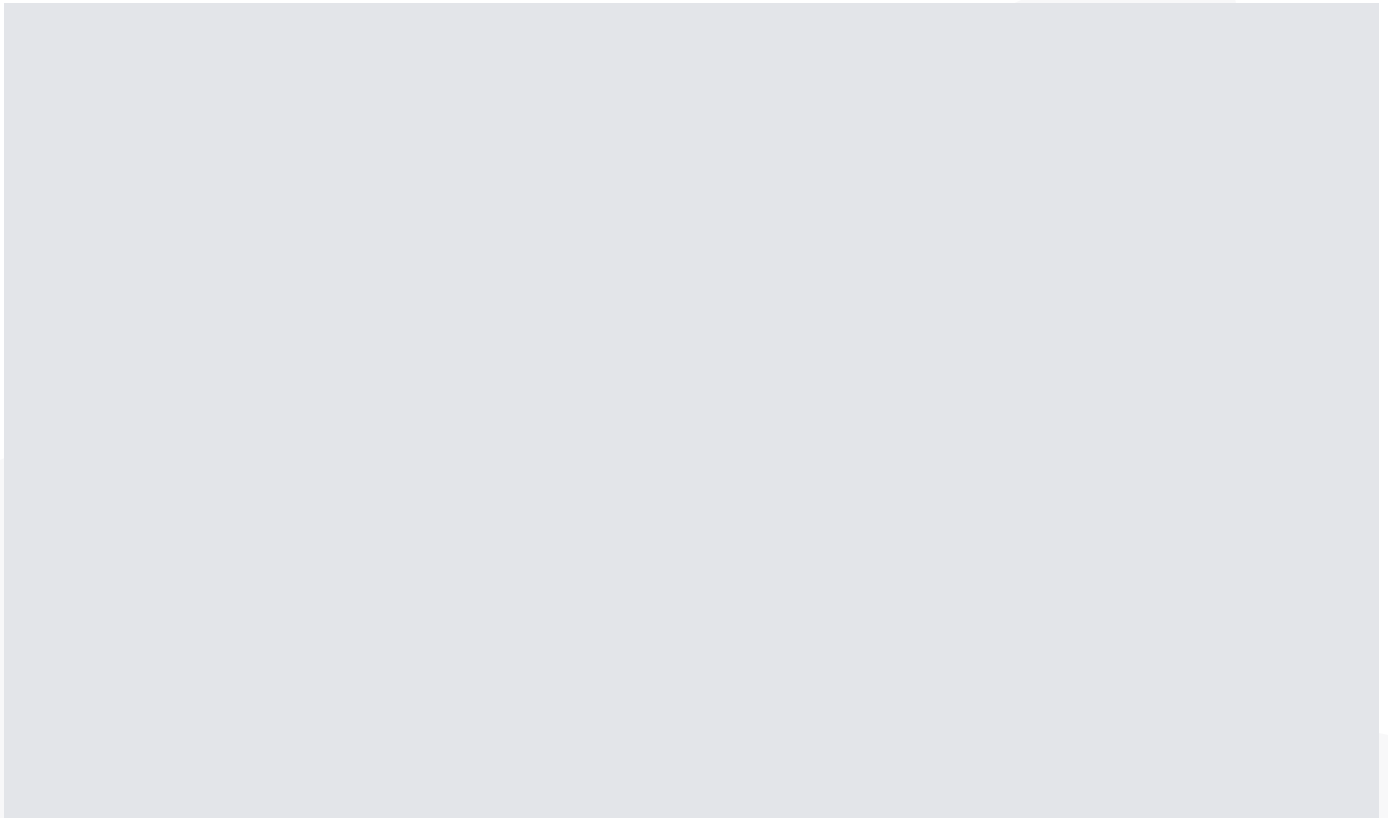
YES

NO

Reference:

Errors caused by wear, incorrect use, or inadequate maintenance are not warranted.
All items must be shipped to Scale Aquaculture AS, Serklauvegen 67, 5440 Mosterhamn.

Upload images:



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