



WARRANTY FAX FORM
FOR ALL EMPIRE WARRANTED PARTS

Date: _____

UPS ground ship-to information

Dealer Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Contact: _____

If rush shipping is required, please complete
'Rush Shipping Information' below. Additional fees apply.

Model Information

Model #: _____
Serial # _____
Install Date: _____
Warranted Part #: _____
Reason: _____

Does not work is not a reason!

Rush Shipping Billing Information

UPS C.O.D Freight charges
Bill Freight Charges to Credit Card Select Credit Card

Name on Card: _____
Card Number: _____
Expiration Date _____

Fax form to Empire Comfort Systems
800-443-8648
Questions? Call 800-851-3153