

Centrifugal Pump Services Ltd

WARRANTY CLAIM FORM

Claim No:

Claim date:

Customer: Name
 Contact
 Postcode

End-user: Name
 Contact
 Tel No

Pump: Type
 Date Supplied

Your Order Ref.
 CPS Invoice Ref.

Requested Action.
 Delete as appropriate

Installation Type: Tick as appropriate

| | | | | | |
|------------|--------------------------|----------|--------------------------|---------|--------------------------|
| Industrial | <input type="checkbox"/> | Domestic | <input type="checkbox"/> | Booster | <input type="checkbox"/> |
| Drainage | <input type="checkbox"/> | Sewage | <input type="checkbox"/> | Other | <input type="checkbox"/> |

Environment: Tick as appropriate

| | | | | | |
|--------|--------------------------|----------|--------------------------|----------|-------------------------------------|
| Indoor | <input type="checkbox"/> | Outdoor | <input type="checkbox"/> | Covered | <input type="checkbox"/> |
| Dusty | <input type="checkbox"/> | Humidity | <input type="checkbox"/> | Amb temp | <input type="text" value="Deg. C"/> |

Power supply: Delete as appropriate

| | | | | | |
|-------------|----------------------|-------|----------------------|-----------|----------------------|
| Voltage (V) | <input type="text"/> | Phase | <input type="text"/> | Frequency | <input type="text"/> |
| Motor Speed | <input type="text"/> | | | | |

Specified Duty:

| | | | | | |
|------|----------------------|------|----------------------|---------------------|---------------------------------|
| Head | <input type="text"/> | Flow | <input type="text"/> | Pipe Dia | <input type="text" value="mm"/> |
| | | | | Overall Pipe Length | <input type="text"/> |

Pumped medium*:
 *For Sewage or Hazardous fluids advise and flush

| | | | |
|------------------|----------------------|-------------|----------------------|
| Description | <input type="text"/> | | |
| Ph value | <input type="text"/> | Viscosity | <input type="text"/> |
| Specific gravity | <input type="text"/> | Temperature | <input type="text"/> |

Claimed defect:

Analysis:

| | |
|-------|----------------------|
| Fault | <input type="text"/> |
| Cause | <input type="text"/> |

Notes: Ebara Pumps UK Ltd will not accept any warranty claim without a warranty claim form being completed and numbered. The warranty claim number and original number must be quoted on all correspondence.

CPS use only

Warranty:

| | | | | | | | |
|----------------------------------|--------------------------|-------------|--------------------------|--------------------------|--------------------------|------------|--------------------------|
| Accepted | <input type="checkbox"/> | Rejected | <input type="checkbox"/> | Replace with f.o.c. pump | <input type="checkbox"/> | Authorised | <input type="checkbox"/> |
| Full credit | <input type="checkbox"/> | Return unit | <input type="checkbox"/> | GRN issued | <input type="checkbox"/> | Init: | <input type="text"/> |
| P.O. for Engineer to attend site | <input type="checkbox"/> | | <input type="checkbox"/> | P.O. for pump/spares | <input type="checkbox"/> | Date: | <input type="text"/> |