

SIGNATURE\_

## **UBC COOL CANADA INC.**

1143 HAULTAIN COURT MISSISSAUGA, ON. L4W 2K1 PHONE: (905) 629-2597 FAX: (905) 629-2577 EMAIL: INFO@BEER-CO.CA WWW.BEER-CO.CA

## WARRANTY AUTHORIZATION FORM

ALL FIELDS MUST BE COMPLETELY FIILLED OUT
Authorization number is required before any repairs or returns can be made

Section A:	ionzation number is required before	e any repairs of returns can be made	
Service invoice Number (if attached)	Return	authorization number	_
rty to Be Reimbursed:			
Date malfunctioned	Date repaired	Date form completed	
Model number	Serial Number	Installation date	
SERVICE COMPANY - Contact name, Phone, Full address		CUSTOMER - Contact name, Phone, Full address	
OMPLAINT:			
Symptoms and summary of diagnost any leaks. Attach pictures of defect <b>Section B:</b> Service performed	sis made are required. List hours and explasif applicable	anation for each repair made. Give exact locatio	n of <b>Hours</b>
Section B: Service performed			
Parts replaced, or refrigerant used (type and amount)			Price
All replacement parts must be return	ed to UBC Group. Returned parts must incl	ude authorization number and serial number on bo	x.
abor Charges Summary			
Hours	_ Labor Rate per	hour\$ Subtotal hours	\$
Parts	\$	GRAND TOTAL	\$
CUSTOMER			

SERVICE TECHNICIAN SIGNATURE\_