



		<b>Warranty Claim No.</b>	
<b>Installation Information</b>			
<b>Customer Name</b>			
<b>Street Address</b>			
<b>City / State / Zip</b>			
<b>Telephone</b>		<b>Date of Site Visit</b>	
<b>Service Organization</b>			
<b>Service Company</b>		<b>Technician's Name</b>	
<b>City / State</b>		<b>Telephone</b>	
<b>Compressor Unit</b>			
<b>Compressor Unit Model No.</b>			
<b>Serial Number</b>		<b>Date of Start-Up</b>	
<b>System Component Model Numbers</b>			
<b>Earth Loop System</b>		<b>Cased Coil</b>	
<b>Hydronic Water Module</b>		<b>Hybrid Cooling Module</b>	
<b>Air Handler</b>		<b>Heat Recovery Module</b>	
<b>Reported Problem</b> (Describe full details. Attach photo, sketch or additional written description.)			
<b>Service History</b> (Describe previous service incl. parts replacements. Attach additional written description.)			
<b>Field Findings and Corrective Actions Taken</b>			

**Root Cause of Problem** (Example: design, installation, sized incorrectly, etc. Be specific.)

**Additional Action Required** (Additional action to be taken.)

**Owner Acknowledgment**

I acknowledge that the service work described herein has been explained to me.

Customer signature: \_\_\_\_\_ Printed name: \_\_\_\_\_ Date: \_\_\_\_\_