

CLAIMS REQUEST

Thank you for submitting your claim and thank you for contacting SurfaceWorks. Please review and complete the form below, this will provide us with the necessary information to process your claim. Make sure to read our **product warranty** before filing a claim. Please confirm that all of the information you provide is correct and submit this form to your SurfaceWorks account administrator.

HERE IS WHAT HAPPENS NEXT:

You will receive a claims number upon submitting your request. If you have any questions or need to talk to a representative immediately please contact us at 414.570.2677. Thank you!

PART 1:Provide a minumum of 3 photos. Attach each image to your email.Photo 1 has to be of the overall furniture piece.Photo 2 has to be a close-up of the damage.Photo 3 has to be a close-up of the label/sticker found underneath the product.

PART 2: Provide contact, customer and shipping info. Date ______ Dealer Name & Customer NO. _____

CONTACT name	END-USER name	
email	phone number	
phone number	address	
address		

PART 3: Order Info.

ORIGINAL PURCHASE ORDER #			MANUFACTURE DATE OR SHIP DATE	
SURFACEWORKS ORDER/LINE #			ITEM # FOUND ON PRODUCT LABEL	
REPLA	ACEMENT PARTS REQUESTED	QTY	REASON FOR REPLACEMENT	 Damage in transit Component Defect Missing Item Wrong Item Received Installer Damage Other
			FINISHES	

PART 4: Description of damage:

Shipping notes and special instructions:

P 414.570.2677 F 414.570.2676