



REMIT TO: Eagle Pump & Compressor Ltd. • Warranty Depot • 1216A - 36th Street NE, Calgary, AB T2E 6M8
 Phone: 1-800-551-2406 • Fax: 1-403-705-2167

1. Owners Information		2. Warranty Performed by:	
Owner's Name	Store No. (If Applicable)	Eagle Group Account Number	Repair Person
Address		Service Center Name	
City	State/Province	Address	
Zip Code/Postal Code	Phone	City	State/Province
3. Unit Purchased From		Zip Code/Postal Code	Phone
4. COMPLETE MODEL NUMBER		Service Center Signature (Certifies Accuracy of All Statements Herein) X	
5. COMPLETE SERIAL NUMBER		6. ENTER THESE DATES	
		PURCHASE DATE	
		MO	DAY
		YR	DATE OF REPAIR
		MO	DAY
		YR	YR
7. PROOF OF PURCHASE			
<input type="checkbox"/> YES: Copy Attached <input type="checkbox"/> NO: Serial Number verified with Eagle's customer service			

8. Customer Comments & Description of Problem (Word "Defective" is Not Sufficient):

9. Warranty Work Performed (Please be specific):

10. Labour time for work performed (not including travel time):

11. Part Number	Qty.	Description	13. TRAVEL:
			Stationary Compressors Only Miles/Kilometers

For Electric Motor and/or Gas Engines, please contact Eagle's customer service department at 1-800-551-2406 for the appropriate warranty procedure.

Visit our website www.eaglecompressor.com for parts breakdowns of all our units.

14. Customer Signature: Attests that all claims for warranty are truthful and according to warranty terms:
X _____ **Date:** _____

OFFICE USE (Do not write in this box)

Approved by Originating Customer Service Rep **Date:** _____

Signature