



FURNITURE - WARRANTY ASSESSMENT (Excluding Upholstery)

| | | | | |
|-----------------|-----------------|--------------------------|---------------------------|--------------|
| Office Use Only | Customer Ref No | Date WA form sent / / | Date Form Returned / / | Action Taken |
| | | | | |

This form is required to evaluate the nature of your claim. Please complete all sections A-E and ensure details are accurate and current. This will help speed up the process. If you have language difficulties please advise the Super A-Mart Customer Service Representative and seek assistance from a family member, friend or translator.

section a: customer details

| | |
|---------------|--|
| Customer Name | |
| Address | |



| | |
|----------------------------|--|
| Preferred contact number | |
| Alternative contact number | |
| email | |
| best time to call | |

section b: product details

| | |
|---------------------------------------------|--|
| Store of purchase | |
| Date of purchase | |
| Name of product | |
| Invoice number | |
| Name on Invoice | |
| What is the warranty period on your invoice | |

| | |
|--------------------------------------------------------|--|
| Is the product clean & free of stains and marks? (y/n) | |
|--------------------------------------------------------|--|



section c: condition report

| | |
|-----------------------------------------|--|
| Please describe the product's condition | |
|-----------------------------------------|--|

section d: description of the issue

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Please provide a detailed description of the damage/s and what you believe has caused the damage. Please email/attach clear photographs, showing the damage/s | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

Examples of Furniture Items (Please tick what item you have that is damaged)

5pce dining 7pce dining 9pce dining buffet etu/tv unit desk bookcase

bed bedside chest coffee table lamp table sofa table 7pce outdoor 9pce outdoor

section e: acknowledgement

I have completed sections a - e and have to the best of my knowledge provided accurate information.

Signature _____ date _____

PLEASE RETURN THIS FORM WITH PHOTOGRAPHS VIA EMAIL OR MAIL TO YOUR STORE OF PURCHASE.

On receipt of this form a Customer Service Representative will assess and contact you. For warranty issues you will be contacted within 5 working days, after receipt of the completed form. If required an inspection at your home may be arranged.