

# WARRANTY PARTS REQUEST

MACHINE DOWN? Y  N

This form MUST be filled out in entirety and submitted electronically to [Parts@SmartMachineTool.com](mailto:Parts@SmartMachineTool.com) ONLY

Date(1<sup>st</sup> Request) \_\_\_\_\_  
 Date(2<sup>nd</sup> Request) \_\_\_\_\_  
 Date(3<sup>rd</sup> Request) \_\_\_\_\_

Office Use Only	
WARRANTY #	
EXP. DATE	

Machine Dealer: \_\_\_\_\_  
 Machine Model: \_\_\_\_\_  
 Serial Number: \_\_\_\_\_  
 Install Date: \_\_\_\_\_  
 Ship Parts To: \_\_\_\_\_  
 Dealer PO \_\_\_\_\_

Customer Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City, State & Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_

Part Number	Manual/Page#	Part Description	Qty.	List Price	Office Use Only	
					STOCK? Y or N	Non-Stock Delivery Est.

Describe Failure: \_\_\_\_\_  
 Recommended Improvement: \_\_\_\_\_

**WARRANTY REQUESTS MUST BE RECEIVED BY 2:00 PM CST FOR NEXT DAY DELIVERY**



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 Parts Fax: 262-521-0502  
[Parts@SmartMachineTool.com](mailto:Parts@SmartMachineTool.com)