

## Parts and Damage Replacement Procedure

1. Please inspect your purchase immediately.
2. This procedure covers product purchased from an authorized Reseller and was received in its originally sealed carton.

**A COPY OF YOUR PURCHASE RECEIPT OR INVOICE MUST BE ATTACHED TO THIS ORDER FORM.  
NO ORDERS WILL BE PROCESSED WITHOUT PROOF OF PURCHASE.**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ (No Post Office Boxes)  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_


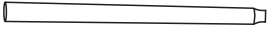




**REASON FOR REPLACEMENT/PLEASE CHECK APPROPRIATE BOX.**

- ☐ ( ) Damaged /scratched, cracked, broken, crushed, etc.
- ☐ ( ) Mechanical malfunction/ drawer glides, swivel mechanisms, lid stays, etc.
- ☐ ( ) Missing pieces
- ☐ ( ) Unfinished surface
- ☐ ( ) Wrong color
- ☐ ( ) Other

IF MORE THAN ONE MODEL NUMBER IS LISTED ABOVE, PLEASE SPECIFY THE EXACT MODEL NUMBER OF YOUR ITEM IN THE SPACE PROVIDED BELOW.

Model Number	Part Letter Code	Quantity

# ASSEMBLY INSTRUCTION

Article/Tell	Pieces/Anzahl	Spare Part
A	4	
B	1	
C	1	
D	1	
E	1	
F	1	
G	1	