

EQUIPMENT START-UP / WARRANTY REGISTRATION FORM

This form must be completed by the Caddy Representative in Project territory, and emailed to warranty@caddycorp.com.

Date: _____
Caddy Rep Company: _____
Dealer Name: _____
Type of Equipment: _____
Ex. Hoods (UV/WW/SHBC/PB) Conveyor (Tray Make-up/Soiled Tray)
Project Name: _____
Address: _____
End User Name/Ph No: _____
Email Address: _____
Signature: _____

- All equipment is accounted for and in good working condition
- Pictures taken show quality of installation and highlights for website
- Video if needed

Comments: _____

Performed by:

Name Signature Date

****Warranty begins 18 months from shipment
or 1 year from date of installation, whichever comes first****