



# SYRON industries, inc. WARRANTY CLAIM REQUEST

## INSTRUCTIONS:

- PLEASE COMPLETE THE ENTIRE FORM.
- PROOF OF PURCHASE **MUST** BE INCLUDED WITH CLAIM FORM SUCH AS A CONTRACTOR OR DEALER INVOICE.
- DOOR WARRANTY CLAIMS MUST HAVE PICTURES OF THE PROBLEM INCLUDED WITH THE CLAIM.  
FORWARD THE COMPLETED FORM TO: Syron industries, inc.  
PO Box 126  
Syracuse, NY 13206
- PLEASE UNDERSTAND THAT THIS CLAIM FORM **WILL NOT BE PROCESSED** WITHOUT ALL OF THE INFORMATION AND DOCUMENTATION REQUESTED. FAILURE TO DO SO WILL ONLY DELAY THE PROCESSING OF THIS CLAIM.
- IF THE ORIGINAL PRODUCT PURCHASED IS OVER 1 YEAR OLD, A \$75.00 INSPECTION FEE IS **REQUIRED** TO BE SUBMITTED WITH THIS CLAIM FORM. THIS FEE WILL BE CREDITED BACK UPON VERIFICATION OF A MANUFACTURER DEFECT FOUND AT THE CONCLUSION OF THE INSPECTION.

## CUSTOMER INFORMATION:

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

## PRODUCT INFORMATION:

Are you the Original Purchaser of the Product: \_\_\_\_\_

Type of Product: \_\_\_\_\_ Unit Size: \_\_\_\_\_

Please be Specific IE: Windows - Double Hung, 2-Lite Slider, 3-Lite slider, Picture Window, Casement Etc.  
 Doors - Steel, Fiberglass, Vinyl, Single, Double, Patio, Sliding, Swing, Sidelite Etc.

Where was Product Purchased: \_\_\_\_\_ Date of Purchase: \_\_\_\_\_

Who Installed the Product: \_\_\_\_\_ Date of Install: \_\_\_\_\_

Syron Order Number: \_\_\_\_\_ **(REQUIRED)**

For windows: This can be found on the label in the head of the frame above the sash. (Example: 03 - 0123)  
 For Doors: This can be found on the label on the side of the frame, or on the dealer invoice. (Example: 230456)

## Please note in the space below the nature of your issue:

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Has the installer been notified of the problem: \_\_\_\_\_ Date Notified: \_\_\_\_\_

Has the installer inspected the problem: \_\_\_\_\_ Date Inspected: \_\_\_\_\_

FORM COMPLETED BY: \_\_\_\_\_ DATE: \_\_\_\_\_