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| Replacement Part Sales Order<br>No..... |
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## Warranty Goods Return Form

This form **must** be returned fully completed with the faulty item for credit to be processed.

**Please send all returns to:**

**Thermofrost Cryo plc  
Robert Fawkes House  
Rea Street South  
Birmingham  
B5 6LB**

**Customer Name** ..... **A/C no.**.....

**Address**.....  
.....  
.....

Outdoor Unit Model.....S/N.....

Indoor Unit(s) Model.....S/N.....

Date Purchased ...../...../..... Invoice no.....

Date Installed ...../...../.....

Part(s)Returned.....  
.....  
.....

Full Details of Failure.....  
.....  
.....  
.....

If full details are not provided this may result in the warranty claim being refused.

If failure occurs after the first year of warranty we reserve the right to ask for records of service history.