

PARTS ORDER REQUEST

B&W Group

TO: Technical Support FAX #: 1-800-681-0673 DATE: _____

DEALER CONTACT: _____ EXT: _____ FAX#: _____

EMAIL: _____ PHONE#: _____

DEALER NAME: _____ DEALER CODE: _____

SHIP TO ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PO NUMBER: (AS NEEDED): _____

If you are requesting Warranty Replacement Parts, a Sales Receipt or Proof of Purchase must be faxed in with this order along with the Serial Number and Cabinet Color.

QTY	MODEL# & SERIES	PART #	WARR N Y	SERIAL #, <small>If YES, Serial# REQUIRED</small>	PURCHASE DATE	DESCRIPTION & CABINET COLOR
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_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>	_____	____/____/____	_____
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DESCRIPTION OF DEFECT: _____

_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>	_____	____/____/____	_____
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DESCRIPTION OF DEFECT: _____

_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>	_____	____/____/____	_____
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DESCRIPTION OF DEFECT: _____

_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>	_____	____/____/____	_____
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DESCRIPTION OF DEFECT: _____

_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>	_____	____/____/____	_____
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DESCRIPTION OF DEFECT: _____

**All warranty parts are shipped UPS ground at no charge.
The shipping and handling charge for non-warranty parts will be calculated using
Method of Shipping, Weight and Destination.**