

Small-Duct Central Heating & Air Conditioning

UNICO, INC. WARRANTY CLAIM INSTRUCTIONS

When shipping all warranty parts, Unico will provide Ground Freight only. If customer / distributor requires next day or second day air shipment then customer / distributor will be responsible for, and billed, the additional costs of shipment.

Return policy for defective parts

Step One—The installing contractor will contact the local Distributor to place a P.O for the replacement part.

Step Two—The Distributor places a purchase order for the part/s and the contractor is required to return the defective part/s back to the Distributor along with the filled out Warranty Claim Form.

Step Three—The Distributor will contact Unico, (brian@unicosystem.com), for an RMA number and submit the Warranty Claim Form.

Step Four— The defective parts are to be returned to Unico Inc., 1120 Intagliata Dr., Arnold, MO. 63010 c/o Rich Martin. No credit will be issued unless the Warranty Parts form is filled out with the proper RMA and the defective parts have been returned to Unico.

Please fill in the REQUIRED* fields on the following pages. Failure to furnish a completed form will only delay the authorization for Warranty coverage.



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Warranty Claim Form

*1. The address where the defect unit is located:	
Name:	
Address:	
City/State/Zip:	
Phone #:	
*2. Product information:	
Model number:	
Serial number:	
Install date:	
*3. Purchase information/Distributor information	
Date of purchase:	
Copy of receipt available: Yes No	
Distributor name:	
Address:	
City/State/Zip:	
Contact name	
Phone#	
Fav#	
Fax#	
*4. Fault description:	
*4. Fault description: Detailed fault description: *5. Contractor information:	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name:	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address:	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address:	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address:	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address:	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address: Contractor city, state & zip: Was the defective part repaired? Yes No If yes, please explain in detail (including date of repair)	
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address: Contractor city, state & zip: Was the defective part repaired? Yes No If yes, please explain in detail (including date of repair) Do you have a copy of the invoice for the part/repair? Yes	No
*4. Fault description: Detailed fault description: *5. Contractor information: Contractor Company name: Contractor name: Contractor company address: Contractor city, state & zip: Was the defective part repaired? Yes No If yes, please explain in detail (including date of repair)	No

When filing the claim make sure to include the following paperwork: Completed copy of the Unico, Inc. Warranty Claim form

Copy of the purchase invoice
Copy of the repair invoice
Make sure you retain a copy for your files