

Chairmat Warranty Claim Form

Warranty Claim Requirements:

- _____ Completed Warranty Claim Form
- _____ Proof of Purchase (Sales Receipt Copy <u>OR</u> Chairmat Label)
- _____ Attach digital photo of cracked area and the cleat side of the mat

All customer claims will be reviewed upon receipt. Please allow 3-4 weeks for processing.

How to Measure Carpet Thickness E-mail claims or questions to: Straighten the end of a paper clip warranty@esrobbins.com 2 Measure through padding from OR top of subfloor to top of carpet Mail all requirements to: Ochoose a chair mat with the **ES Robbins Office Products** same or less depth based on ATTN: Warranty Claim your carpet measurement 2802 East Avalon Avenue MEASURE Muscle Shoals, AL 35661 if you are not sure, choose DEPTH a chair mat designed for thicker carpet or a heavier application Warranty is only good in

All fields below must be completed.

the continental United States and Canada.

Warranty Claim Form									
Date:									
Customer Name:									
Street Address:									
City:				State:			Zip:		
Daytime Phone Number:			Email:						
Product Number / UPC Coo	de:								
Product Information:									
Mat Size:									
Mat Type(check one):	Carpet	Hardfloor	Mat Shap	ape (check one):		Lip		Rectangle	
Carpet Thickness (including pad) round up to nearest meas			easurement:	1/8"	1/4"	3/8"	3/4"	1"	Over 1"
Date of Original Purchase:									
Electronic Customer Signat	ture:								