

Warranty Registration Form

Completing this form activates your 3 Year Limited Warranty. Once you have completed the form, fax it to (201) 767-1369.

Customer Information (all fields required):

Name		Company	
Address		Phone	
City		Email	
Country			

Order/Product Information: _____

Dealer/Distributor Purchased From: _____

Item Number/Description: _____

Serial Number (if applicable): _____

Delivery Date: _____ Factory Order Number (6 Digits): _____

Please take a moment to rate us in the following areas:

	OUTSTANDING			UNACCEPTABLE	
Warranty	5	4	3	2	1
Manufacturing Time	5	4	3	2	1
Warranty	5	4	3	2	1
Ease of Delivery	5	4	3	2	1
Packaging/Assembly	5	4	3	2	1
Conformity to Catalog Description	5	4	3	2	1
Cost Realive to Value & Service	5	4	3	2	1
Overall Experience	5	4	3	2	1

How did you learn of Hausmann Industries?

Dealer Previous Purchase Advertisement Internet Search Convention

Other: _____

What two factors most influenced your purchase of Hausmann Products?

Quality Warranty Quick Delivery Value for Price
 Advertisement Recommendation Brand Name Catalog
 Company Reputation Custom Capabilities Customer Service Dealer

Comments/Suggestions: _____

I will be purchasing the following products within the next 6 months: _____

Send me a catalog Add me to your email list

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