

# Warranty Claim Form

Fill out this form completely and email to: [warranty@globalknives.com.au](mailto:warranty@globalknives.com.au) or post to

**Global Knives Returns, PO Box 837, Hornsby NSW 1630 Ph:1800 808 971**

\*Please attach photo of the faulty item to this warranty claim form

\*Please attach proof of purchase to this warranty claim form

## Contact Details

Lodgement Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

\_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

## Retailer Details

Date of Purchase: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Retailer: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

\_\_\_\_\_

## Brand Product Description

Product Purchased: \_\_\_\_\_

Serial Number on Product (Cuisinart electrical products only): \_\_\_\_\_

Warranty Claim Details: \_\_\_\_\_

\_\_\_\_\_

Nature of Defect: \_\_\_\_\_

\_\_\_\_\_

Please tick if you have included photograph of the faulty item to this claim form

Please tick if you have included copy of your proof of purchase to this claim form

\_\_\_\_\_

OFFICE USE - ASSESSMENT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_