



Warranty Evaluation Claim Form

In order to process your claim quickly and efficiently, please complete, and return this form with your product.

This form is critical for fast and efficient processing of your claim. Without this completed form your claim cannot be processed.

Name:
Address:
Email Address:
Date of Purchase:
Product Description / Model #:
Brief description of issue:

Once your claim has been approved, your product will be repaired or replaced at no charge at the sole discretion of the company. Typically, warranties are acknowledged the same day they are received, and shipped the following business day to the address listed above at no cost to the consumer. There is no refund for any shipping costs incurred from the return.

Address for all warranty claims

**Escali Measuring Equipment
Attn: Warranty Claims Dept.
3203 Corporate Center Drive, Ste# 150
Burnsville, MN 55306**

We reserve the right to reject any warranty claim that is determined to be caused by improper handling, misuse, abuse, disassembling or altering. (Examples include: impact damage, breakage, unauthorized environment, etc). Warranty does not cover normal wear and tear or consumables like filters, gaskets, etc.

Thank you for your patience and understanding.

Privacy Statement

The information collected on this form will only be used to process your claim faster and more efficiently. Your information **will not** be used for any other purpose and **will not** be shared with anyone. Your privacy will be respected and protected.