

EQUIPMENT START-UP / WARRANTY REGISTRATION FORM

This form must be completed by the Caddy Representative in Project territory, and emailed to hwoodruff@caddycorp.com.

Date: _____

Caddy Rep Company: _____

Dealer Name: _____

Type of Equipment: _____
Ex. Hoods (UV/WW/SHBC/PB) Conveyor (Tray Make-up/Soiled Tray)

Project Name: _____

Address: _____

End User Name/Ph No: _____

Email Address: _____

Signature: _____

- All equipment is accounted for and in good working condition
- Pictures taken show quality of installation and highlights for website
- Video if needed

Comments: _____

Performed by:

Name Signature Date

****Warranty ends 18 months from shipment
or 1 year from date of installation, whichever comes first****