MANUFACTURER'S WARRANTY REPORT

FOR MONTH ENDING _____

Name	
Address	
City	
Phone #	

Member Registration Number

Complete and Mail to:
LRWP
Atlantic Region
P.O. Box 27046
Dieppe, NB E1A 6V3
Tel: 506.854.4432
Tel: 1.877.854.4432
Fax: 506.854.6330

NOTE –All Warranty Insurance Premiums are subject to the appropriate Government Sales Tax (i.e. GST or HST)

SOLD TO	YEAR	SIZE	DATE SHIPPED	BRAND NAME (MODEL)	SERIAL NUMBER	SINGLE OR MULTI SECTION		PROVINCE OF RETAILER	FOUNDATION	REGISTRATION COST $	REGISTRATION # (FOR LRWP USE)