Food Service Equipment

Air Systems

## REPRESENTATIVE DEMO / WARRANTY REGISTRATION FORM

This form must be completed by the Caddy Representative in Project territory, and emailed to <a href="https://www.hwoodruff@caddycorp.com">hwoodruff@caddycorp.com</a>.

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 a	accounted for and in good working condi	tion
□ Pictures taken sh	now quality of installation and highlights f	or website
$\square$ Video if needed		
□ End user was giv	ven user manual/link to user manual	
Comments:		
Performed by:		
Name	Signature	Date

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

Phone: 856-467-4222