**Please complete the following and email to one of the following warranty queues:**

[**blower.warranty.spr@md-kinney.com**](mailto:blower.warranty.spr@md-kinney.com)**,** [**vacuum.warranty.spr@md-kinney.com**](mailto:vacuum.warranty.spr@md-kinney.com)**,** [**mobile.warranty.spr@md-kinney.com**](mailto:mobile.warranty.spr@md-kinney.com)

**Do not return material without a Warranty Return Authorization.**

|  |  |
| --- | --- |
| **Date:** | **MDK Account #:** |

|  |  |  |
| --- | --- | --- |
| **Distributor / OEM:** | | **Phone:** |
| **Address:** | | |
| **City:** | | **Fax:** |
| **State/Province:** | **Zip/Postal code:** | **email:** |
| **Contact:** | |  |

**Equipment Owner:**

|  |  |  |
| --- | --- | --- |
| **Company name:** | | |
| **Address:** | | |
| **City:** | **State/Province:** | **Zip/postal code:** |

**Equipment Information**

|  |  |  |
| --- | --- | --- |
| **Description/Model:** | **Serial Number:** | |
| **Hours in Service:** | **Start Up date:** | |
| **Application:** | | |
| **Operating Pressure/Vacuum:** | | **Volts/Phase/Hz:** |
| **Environment** (dust, ventilation, temperature, location, etc.)**:** | | |

**Description of Problem**

|  |
| --- |
| **Date problem occurred:** **Photos taken of condition received: YES or NO** |
| **The original complaint of the customer:**  **Steps taken to troubleshoot complaint:**  **Any work completed on unit or has it been replaced:** |

**Replacement Purchased**

|  |  |  |  |
| --- | --- | --- | --- |
| **Part Number** | **Qty** | **Description** | **Invoice / Ser#** |
|  |  |  |  |
|  |  |  |  |
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M35Wb 2.28.23