



# Warranty Claim Form

The Premiere Source for E-Z UP Products & Services

PLEASE COMPLETE THIS FORM ENTIRELY. ALL INFORMATION IS REQUIRED TO PROCESS YOUR CLAIM.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: ( ) - \_\_\_\_\_ Work Phone #: ( ) - \_\_\_\_\_ E-mail: \_\_\_\_\_

**E-Z UP Model Name (Please check one):**

- Bungalow       Craft Dome       Dome II       Eclipse       Eclipse II
- Embassy       Embassy II       Encore II       Endeavor       Enterprise II
- Escort       Express II       Express III       HUB       Hut II
- Instant Table       POP II       POP Lite       Pyramid II       Sierra
- Sierra II       Speed Shelter II       Other: \_\_\_\_\_

Canopy Top Color: \_\_\_\_\_ Frame Color: \_\_\_\_\_ Other: \_\_\_\_\_

Describe the broken part and how it happened: \_\_\_\_\_

\_\_\_\_\_

Torn Fabric?:     Top       Railskirt       Sidewall       Other \_\_\_\_\_

About how many days have you used your shelter in the past year?: \_\_\_\_\_

How long do you normally keep the shelter up at one time?: \_\_\_\_\_

**All warranty claims must show proof of purchase\*, by fax, email or mailing a copy of their original purchaser receipt with this warranty claim form to:**

\* Your product may no longer be under warranty if purchased more than 2 years ago.

**E-mail to:** warranty1@ezupdirect.com

**Mail to:** Attention: Warranty Department  
2273 La Crosse Ave., Ste 112  
Colton, Ca 92324

**Fax to:** (909) 426-0063