



CLAIMS PROCESS

<http://www.semcohvac.com/service-support/claim-form>

573-443-1481 | www.semcohvac.com

- 1 Locate the system label located on the unit (See **Figure 1**).
- 2 Click on this link to go to the claim form:
<http://www.semcohvac.com/service-support/claim-form>
- 3 Fill out the online claim form (See **Figure 2**). The information needed to fill out the form can be found on the unit label (See **Figure 1**). Click “Send Now” when completed.
- 4 You will receive an email confirmation regarding your claim request.

FIGURE 1. Unit label.

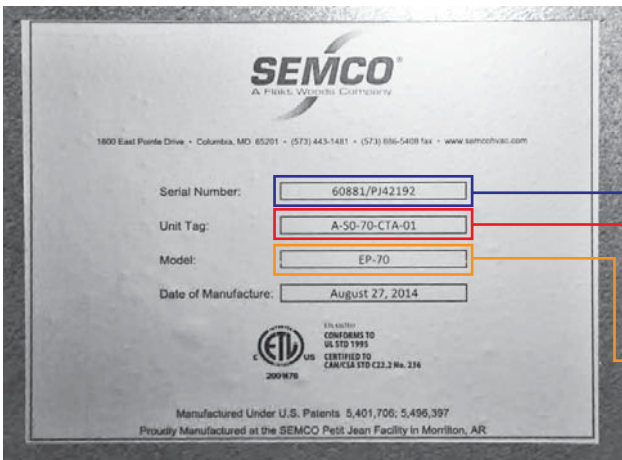


FIGURE 2. Online Claim Form

Claim Form

*EMAIL ADDRESS

CLAIM# (SEMCO USE ONLY)

DATE ISSUE FOUND (YYYY/MM/DD)

PRODUCT IDENTIFICATION

MODEL# OR JOB# PRODUCT CATEGORY SERIAL# OR ORDER#

FAILURE CATEGORY

PROD/EQUIP OWNERS INFORMATION

NAME PHONE

SHIP TO CONTACT INFO

NAME PHONE

PRODUCT/EQUIPMENT LOCATION

NAME ADDRESS CITY

STATE ZIP CODE COUNTRY

SHIP TO ADDRESS

NAME ADDRESS CITY

STATE ZIP CODE COUNTRY

PLEASE PROVIDE A DETAILED DESCRIPTION OF THE FAILURE

SEND NOW