

Northwest Distribution Inc.

3840 West Seltice Way • Post Falls, Idaho 83854
208-457-8400 / fax 208-777-1641

Dealer Warranty Replacement Part Request Form

Please fax completed form to Tecnical services at 208-777-1641 or email to
kristina@nwdinc.com

ALL FIELDS REQUIRED UNLESS OTHERWISE SPECIFIED

NWD ACCOUNT #

DEALER NAME & PHONE#

CONTACT SUBMITTING REQUEST

OUR PO# THE UNIT WAS PURCHASED ON

YOUR PO#
(OPTIONAL)

SHIP TO ADDRESS
(NOTE: CAN SHIP TO DISTRIBUTOR OR DEALER ONLY)

FIREPLACE MODEL AND SERIAL #

DATE CODE & INSPECTOR #
(ACCESSORIES, GAS VALVES,BLOWERS ETC..)

DATE OF PURCHASE

DATE OF INSTALLATION

DATE PART FAILED

PART DECRPTION

PART NUMBER

REASON FOR REPLACEMENT

END USERS NAME

END USERS ADDRESS

END USERS PHONE #

DATE OF THIS REQUEST

NOTE: All information must be provided to qualify as a warranty replacement. If more than one part or more space is needed please attach an additional list with relative information.