

Integrated Warranty Systems Transfer Form

Current Customer Name: _____

IWS Warranty Contract #: _____

Product: _____

New Customer Name: _____

Address: _____

City: _____

Phone Number: (_____) _____

Date of Transfer: ____/____/____

Current Customer Signature: _____

New Customer Signature: _____

- * Warranty must be transferred within 30 days of purchase of unit
- * New customer will receive a copy of warranty contract and terms