

## EVERLOC+™ COMPRESSION-SLEEVE TOOLS SERVICE REQUEST

<b>Step 1:</b> Fill in the form. All fields are required. Print two	Your Name:
(2) copies of this PDF service form. Place one in the box along with the tool. Keep one copy for your records.	Company:
	Address:
<b>Step 2:</b> Collect the proof of purchase and include a copy in the box along with the tool to ensure your	Postal Code:
services are covered under the warranty agreement.	Phone:
Refer to the REHAU PEXa Limited Warranty for details.	Email:
<b>Step 3:</b> Package the tool for shipment.	Tool Type:
Step 4: Ship the tool to the address provided below.	Tool Serial #:
	Reason for Return: Repair Regular Maintenance Other
Submitting this form confirms that you have permission to act on behalf of the person/company that you have	Describe Problem:

## Where to Send for Service

detailed here. You may incur costs for services. Please contact your service center for further information.

## For Canada:

Power Tool Klinic Attn: Clayton Welsh 2219 35th Ave NE, Suite 11 Calgary, AB T2E 6W3 Canada

Tel:403-276-4633

Email: service.powertoolklinic@gmail.com

Price Quotation Needed? Yes

## Where to find the tool serial #:



No

Remove battery, tool serial # is on label inside the foot of the tool.

www.na.rehau.com 855.727 CA/en, 29-Jul-21