Warranty Form

Invoice number:	Date of invoice:
Name:	
Address:	
City:	
Country:	
Telephone number:	
E-mail address:	
Description defective product:	
-	

- Please print and complete this warranty form.
- Please enclose a copy of your invoice to this warranty form.
- Both documents are needed to process your warranty application.
- Please note that the product(s) must be packed and shipped carefully. The method of shipment is on one's own responsibility.

Return address:

BensonTrade P.O. Box 688 5400 AR Uden The Netherlands