POWER VAC® CORP.
PROFESSIONAL SWIMMING POOL VACUUM

# VACUUM REPAIR RETURN FORM

**PLEASE PRINT THIS FORM AND INCLUDE WITH YOUR VACUUM WHEN SENDING IN FOR REPAIR.**
**Mail to: Power Vac Corporation, 4811 NE 12th Ave Oakland Park, FL 33334 • PH: 1.877.771.6970 • FX: 954.491.0407**

Company: _____

Name: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____

**RETURN SHIP TO ADDRESS:**

Street: _____

City _____ State: _____ Zip: _____

**SERIAL #** located underneath vacuum: _____

**Power Vac will contact you with an estimate. We accept Visa, Master Card & American Express.**

**Please explain the problems you are having with the vacuum.**

•Please do not send in your battery case or battery.
•Please include your proof of purchase information if the unit is still under warranty.
**Warranties will not be granted to vacuums without serial numbers or proper proof of purchase. (Invoice, copy of warranty card etc.)**