



**ENGINEERED COMPOSITES INC.**

1035 MISSION STREET  
WINNIPEG, MANITOBA  
CANADA R2J 0A4  
PH: 204-233-0671

EMAIL: [info@carlsonindustrial.ca](mailto:info@carlsonindustrial.ca)

## CEC INC. WARRANTY CLAIM FORM

### INSTRUCTIONS FOR COMPLETING FORM:

1. Model and serial number of the product involved must be supplied (one serial number per claim form).
2. Submit claims directly to Carlson Engineered Composites via e-mail to [info@carlsonindustrial.ca](mailto:info@carlsonindustrial.ca).
3. A copy of the Invoice/Bill of Sale is required to determine warranty status.
4. This form may be used as your warranty registration card.
5. If product has been installed and proof of date of installation cannot be provided date of sale or date of manufacturing will be used as start of warranty period.
6. Claim for defective product must be received within fifteen (15) days of the failure.
7. If external damage is found these claims must be received within 24hours of shipping.
8. Completing and submitting this Warranty Claim form does not guarantee a repair or replacement will be provided under warranty. A formal review will be undertaken to determine the warranty status and next steps required.
9. Do not discard the product or accessories until approved to do so by Carlson.
10. Permission must be obtained from Carlson prior to any alterations or repairs being undertaken.

CARLSON fiberglass tanks are warranted against defects in material and workmanship according to our specifications, providing that assembly and installation is proved to be correct, and in accordance with CARLSON installation and assembly instructions.

Should a CARLSON tank prove to be defective, please contact your dealer or factory for a copy of the complete warranty statement. (Complete warranty statement was also included with registration card.)

### NO CONSEQUENTIAL DAMAGES

- Carlson is not responsible for economic loss; or special, indirect, or consequential damages, including, without limitation, of losses or damages arising from damages, removal and replacement costs, labour, and equipment costs, backfill materials, transportation, and or other extraneous costs.
- Excavation, landscaping, or other installation/removal costs.
- Transportation to and from a dealer or factory will be at the owner's expense.

### WARRANTY REGISTRATION

- Warranty protection may not be valid if the Warranty Registration Card was not returned within fifteen (15) days from the date of burial.

### WARRANTY SERVICE GUIDE

- To prevent delays in processing claims, a detailed explanation of the diagnosis/failure and the repair are required.
- To see what is covered/not covered under warranty please refer to the Warranty Statement.
- For technical questions: please call us at 204-233-0671 or e-mail [info@carlsonindustrial.ca](mailto:info@carlsonindustrial.ca).



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CLAIMANT INFORMATION

COMPANY NAME:
OPERATING NAME:
PHYSICAL ADDRESS:
CITY: PROVINCE:

DATE:
PHONE:
FAX:
EMAIL:
POSTAL CODE:

END USER INFORMATION (IF DIFFERENT FROM ABOVE)

FIRST NAME:
LAST NAME:
PHYSICAL ADDRESS:
CITY: PROVINCE:

PHONE:
FAX:
EMAIL:
POSTAL CODE:

PRODUCT INFORMATION

PURCHASED DATE:
PURCHASE ORDER No.:
PURCHASED FROM:
PHYSICAL ADDRESS:
CITY: PROVINCE:

INVOICE No.:
PHONE:
EMAIL:
POSTAL CODE:

TYPE OF PRODUCT: (Example: Septic Holding Tank, Pump-out Tank, Chemical Storage Tank, etc.)

MODEL: SERIAL NUMBER:

HAS THE PRODUCT BEEN INSTALLED? YES NO (IF YES, PLEASE COMPLETE THE FOLLOWING)

DATE INSTALLED:
INSTALLER NAME/COMPANY:
PHYSICAL ADDRESS:
CITY: PROVINCE:

PHONE:
EMAIL:
POSTAL CODE:

CLAIM REQUEST INFORMATION

PLEASE DESCRIBE (IN AS MUCH DETAIL AS POSSIBLE) THE REASON FOR THIS WARRANTY REQUEST: (USE A SEPARATE SHEET IF REQUIRED)

DATE OF DAMAGE/DEFICIENCY FOUND:
[Multiple blank lines for description]

SUPPORTING DOCUMENTATION INCLUDED WITH THIS CLAIM: YES NO
SUPPORTING PHOTOS OF DAMAGE/DEFECT(S) INCLUDED WITH THIS CLAIM: YES NO
HAS THE PRODUCT BEEN REQUESTED TO BE RETURNED F.O.B. FACTORY: YES NO
HAS A RETURN MATERIAL AUTHORIZATION NUMBER BEEN ISSUED: YES NO RMA No.:



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RMA - RETURN MATERIAL AUTHORIZATION

FOR SHOP AND OFFICE USE ONLY

RMA NUMBER: \_\_\_\_\_

HAS THE PRODUCT BEEN RETURNED F.O.B. FACTORY: YES [ ] NO [ ]

IS THERE A COPY OF ORIGINAL DRAWING AVAILABLE: YES [ ] NO [ ]

IF YES, PLEASE MARK ANY AND ALL DEFICIENCIES ON THE DRAWING FOR REVIEW AND FILING.

HAS AN EXTERNAL VISUAL INSPECTION BEEN COMPLETED ONCE ARRIVED: YES [ ] NO [ ]

HAVE PHOTOS BEEN TAKEN PRIOR TO OFFLOADING: YES [ ] NO [ ]

ANY VISUAL EXTERNAL DEFECTS/DAMAGE PRESENT: YES [ ] NO [ ]

PLEASE DESCRIBE (IN AS MUCH DETAIL AS POSSIBLE) ANY EXTERNAL VISUAL DEFECTS/DAMAGE:

Four horizontal lines for describing external defects/damage.

HAS AN INTERNAL VISUAL INSPECTION BEEN COMPLETED: YES [ ] NO [ ]

ANY VISUAL INTERNAL DEFECTS/DAMAGE PRESENT: YES [ ] NO [ ]

WHERE IS THE DEFECT/DAMAGE FOUND? (CHECK ALL THAT APPLY)

MAIN BODY [ ] COLLAR [ ] DIVIDER [ ] SECONDARY BONDING [ ] ACCESSORIES [ ]

WHAT IS THE ROOT CAUSE OF FAILURE DEFECTS/DAMAGE? (CHECK ALL THAT APPLY)

MATERIAL [ ] WORKMANSHIP [ ] IMPROPER ASSEMBLY [ ] LABELLING [ ]

PLEASE DESCRIBE (IN AS MUCH DETAIL AS POSSIBLE) ANY INTERNAL VISUAL DEFECTS/DAMAGE:

Four horizontal lines for describing internal defects/damage.

HAVE PHOTOS BEEN TAKEN DURING INSPECTION: YES [ ] NO [ ]

IS THE TANK REPAIRABLE? YES [ ] NO [ ]

WHAT ARE THE STEPS REQUIRED FOR REPAIR/RECONDITIONING?

Four horizontal lines for describing repair/reconditioning steps.

