

Green Mountain Window Co.

SERVICE REQUEST FORM

DEALER MUST FILL OUT IN FULL FOR PARTS ONLY OR PARTS AND LABOR

Note:

Date service was completed:

Service or Sales rep. comments:

- 1. Parts covered under warranty will be delivered to the original dealer for no charge or shipped directly to the customer with a shipping and packaging charge (or can be picked up in Rutland, VT).
- 2. Please verify that all service requests are not installation related and are fully covered under warranty prior to submitting. Contact your sales representative with any questions.
- 3. Completed forms should be given to your outside sales representative (territory manager). If your representative isn't available fax completed form to 802-747-7864 or mail to 92 Park St., Rutland, VT 05701. Incomplete forms can not be processed.

Dealer Information:	
Name:	Contact Name:
Phone:	
Homeowner Information:	
	Phone:
Address:	
Job Information: (G.M.W. can not pro	ovide parts or service without a copy of the original order)
If paperwork is unavailable the order nun	(Listed on original G.M.W. acknowledgment and invoice) mber is stamped on side of double hung sash or imprinted in the glass spacer of casements the easiest way to determine the order number.
Original Dealer P.O. # or Name	
GWM Invoice Number:	GMW Invoice Date:
Date representative visited jobsite: Please answer the following questions (ci a. Installation was checked and o b. Service required: (note: labor is covered c. If labor is required and covere d. Please provide a description of	eted product at the jobsite: ircle one): determined not to be a cause of the problem: Y N Parts Only Parts and Labor under warranty for one year from invoice date) ed by warranty, does homeowner need to be informed before work begins? Y N of the problem and your opinion of work required (please send photos):
copying the order and circling	between 10 and 20 years old we will provide a quote for the portion of glass cost that is no pre placing an order.
Date service request was received:	GMW service number:

_Service completed by:___