
WARRANTY RETURNS DIRECTIONS

QMF – 48

When returning a compressor for warranty, you must complete a **WARRANTY CLAIM TAG** and attach it to the compressor. A **WARRANTY CLAIM TAG** was shipped with each new compressor. If you don't have one, please contact us at 1-800-743-6009

All returns, claimed to be in-warranty, must have a completed A-1 Warranty Claim Tag attached. If the Tag is not properly completed or Returned with the inoperative compressor, the return will be handled as an OUT OF WARRANTY CLAIM

Filling Out Warranty Claim Tag

1. Date of This Return.
2. Returning Wholesaler.
3. Original Compressor Model Number.
4. Original Compressor Serial Number.
5. Check if CORE RETURN Only.
6. Check if WARRANTY RETURN
7. Date Compressor Installed on Job Site
8. Date of Compressor Failure.
9. Replacement Compressor Model No.
10. Replacement Compressor Serial No.
11. Type of Refrigerant
12. Type of Oil
13. Nature of Defect (please ask contractor)
14. Name of Contractor

WARRANTY TAGS HAVE THREE PARTS:

- TOP:** Retain for your records.
- MIDDLE:** Attached to return goods PO
- HARDCOPY:** Attached to the compressor.

WARRANTY RETURNS TAG

QMF- 21

Date _____ 1 _____	A-29651
Wholesaler _____ 2 _____	City, State _____
Model No. _____ 3 _____	Serial No. _____ 4 _____
CORE RETURN _____ 5 _____	
<i>All warranty claims must have information below completed.</i>	
IN WARRANTY _____ 6 _____	
Date Installed _____ 7 _____	Date Failed _____ 8 _____
<i>The above compressor was replaced with-</i>	
Model No. _____ 9 _____	Serial No. _____ 10 _____
Refrigerant Type _____ 11 _____	Oil Type _____ 12 _____
Nature of defect _____ 13 _____	
<i>(Do not say defective-Describe)</i>	
Contractors name _____ 14 _____	
A-1 Compressor- 140 Mendel Dr. SW	
Atlanta, GA 30336	
Technical assistance- 1-800-394-1521	



"Excellence...Inside and Out"

140 Mendel Drive
Atlanta, Ga 30036
Ph: 404 699-1521
Ph 800 743-6009
Fax: 800-743-7784

CLEAN TAG FOR USE IF ORIGINAL IS MISSING

(please make 3 copies and distribute as outlined in the return tag directions)

A1 COMPRESSOR, INC. WARRANTY RETURN TAG	
Date _____	
Wholesaler _____	City, State _____
Model No. _____	Serial No. _____
CORE RETURN _____	
<u>All WARRANTY CLAIMS must have information below completed.</u>	
IN WARRANTY _____	
Date Installed _____	Date Failed _____
<u>The above compressor was replaced with-</u>	
Model No. _____	Serial No. _____
Refrigerant Type _____	Oil Type _____
Nature of defect _____ <u>(Do not say defective-Describe)</u>	
Contractors name _____	
A-1 Compressor- 140 Mendel Dr. SW Atlanta, GA 30336 Technical assistance- 1-800-394-1521	



Division of Orrbilt Compressor

www.orrbilt.com • sales@orrbilt.com

