

Warranty Plus Application

CONTACT DETAILS

Full Name

Postal Address Contact Telephone No. (0)

..... Mobile (0)

..... Fax (0)

Email Address

EQUIPMENT DETAILS

Manufacturer	Model	Original Warranty Expiry	Serial Number	Retail Purchase Price (excl GST)

1. Brief Description of the Items Listed

2. What is the period of the Extended Warranty? 1 year 2 years 3 years OEM/Warranty Enhancement

DECLARATION / PRIVACY ACT

To be completed by the applicant(s) shown and also on behalf of any other person covered by this extended warranty.

- 1) I/We declare that all information contained in this form and on any attachments is complete and correct;
- 2) I/We have disclosed all information relevant to the acceptance of this application;
- 3) I/We agree that this application shall be the basis of the contract between me/us and Warranty Plus and The Retailer as indicated and I/We am/are willing to accept the terms, conditions, and exclusions for this warranty;
- 4) I/We understand that this application requests personal information about me/us which is held by Warranty Plus and The Retailer to evaluate my/our application for the extended warranty. Failure to provide the information sought may result in my/our application being declined or my/our extended warranty being void from the beginning;
- 5) I/We authorise Warranty Plus and The Retailer to;
 - a) Disclose personal information to other parties who have a financial interest in the subject matter of this warranty;
- 6) I/We understand that there are rights of access to and correction of information held by Warranty Plus and The Retailer.

**Please fax this application along with a copy of the sales invoice to
 Warranty Plus Ltd - Fax: 09 278 5302**

RETAILER USE

Retailer contact:

Phone:

Notes: