

# *AquaMark*

## Extended Warranty Offer

**Extra six-month warranty with return of this coupon to AquaMark.**

(VALID ONLY IF RETURNED WITHIN SIX MONTHS OF INSTALLATION)

(must be filled in completely)

Name \_\_\_\_\_

AquaMark Model # \_\_\_\_\_

Address \_\_\_\_\_

Serial # \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_

Purchase Date \_\_\_\_\_

Installation Date \_\_\_\_\_

Installation Contractor \_\_\_\_\_

Click the green button to submit your filled form.

or

This form can be found at [www.aquamarkboosters.com](http://www.aquamarkboosters.com)

Please download and save the form, fill the form, and return to: [info@aquamarkboosters.com](mailto:info@aquamarkboosters.com)

make sure to attach the filled form to your email.

Return by fax: (888) 246-5725

Return by mail: AquaMark, 245 W. Roosevelt Road, Bldg. 12, Suite 83, West Chicago, IL 60185