

30 YEAR SYSTEM EXTENDED WARRANTY REGISTRATION FORM



APPLICANT INFORMATION

Company Name: _____	Contact Name: _____
Address: _____	Project Name: _____
City, Zip Code: _____	Contact e-mail: _____
Country: _____	Phone: _____

INSTALLATION & END USER INFORMATION

Individual Installer Information

Forename: _____

Surname: _____

Address: _____

Mobile: _____

E-mail: _____

nVent Certification No: _____

System Owner

Client: _____

Site Address: _____

City: _____

Zip Code: _____

Country: _____

Contact Name: _____

PRODUCTS

Please list all products for the above project along with the volume purchased/installed. Complete on reverse if necessary.

Product Name	Part Number	Quantity / Metres

DISTRIBUTOR INFORMATION (PURCHASED FROM)

Company Name: _____	PO number: _____
Address: _____	Date of Purchase: _____
City: _____	Invoice number: _____
Zip Code: _____	Date of Installation: _____
Country: _____	

INSTALLATION & END USER INFORMATION

Did all installed cable pass applicable tests? _____ Were the cables free of defect & in working conditions? _____

Registration must include:

1. Copy of horizontal schematics and total number of runs.
2. Copy of passing test results (electronic format can be sent to PyrotenaxWarranty@nVent.com)
3. 3x photographs of installation (electronic format can be sent to PyrotenaxWarranty@nVent.com)
4. Commissioning Report

DECLARATION

By signing this registration form, you are stating that the above information to your knowledge is accurate and complete.

Applicant Signature: _____	End User Signature (optional): _____
Name (CAPITALS): _____	Name (CAPITALS): _____
Date: _____	Date: _____

Please fax or e-mail completed form and attachments using the below contact details.

Terms & Conditions apply, copies available upon request. Completing this form does not constitute a formal agreement.

United Kingdom

Tel: 0800 969 013
Fax: 0800 968 624
PyrotenaxWarranty@nVent.com

Ireland

Tel: 1800 654 241
Fax: 1800 654 240
PyrotenaxWarranty@nVent.com

Middle East

Tel: +971.4.378.1700
Fax: +971.4.378.1777
PyrotenaxWarranty@nVent.com

India

Tel: +91.120.464.9500
Fax: +91.120.464.9548
PyrotenaxWarranty@nVent.com



nVent.com

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