

# CLAIM FORM

**Customer:**

**Email:**

**Phone number:**

**Contact person:**

**Claim ID no.:**

**Product category:**

*Camera System*

*Feeding System*

*Barge*

*Thermolicer*

*FlexiBridge*

*Other*

Send an e-mail to [warrantyclaims@scaleaq.com](mailto:warrantyclaims@scaleaq.com) to receive your ID number. **Do not** ship any items to us before receiving your ID.

**Sales Order / Invoice no. / Project no.:** (Must be filled in).

**Equipment:**

**Serial number:**

**Error:**

**Cause of error:**

**When was the error detected?**

**Preferred action of approved claim** (new parts, invoice, repair)

**Image(s):** Upload images on page 2.

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FILLED IN BY SCALEAQ:

**Feedback:**

**Reviewed by:**

**Warranty granted:**

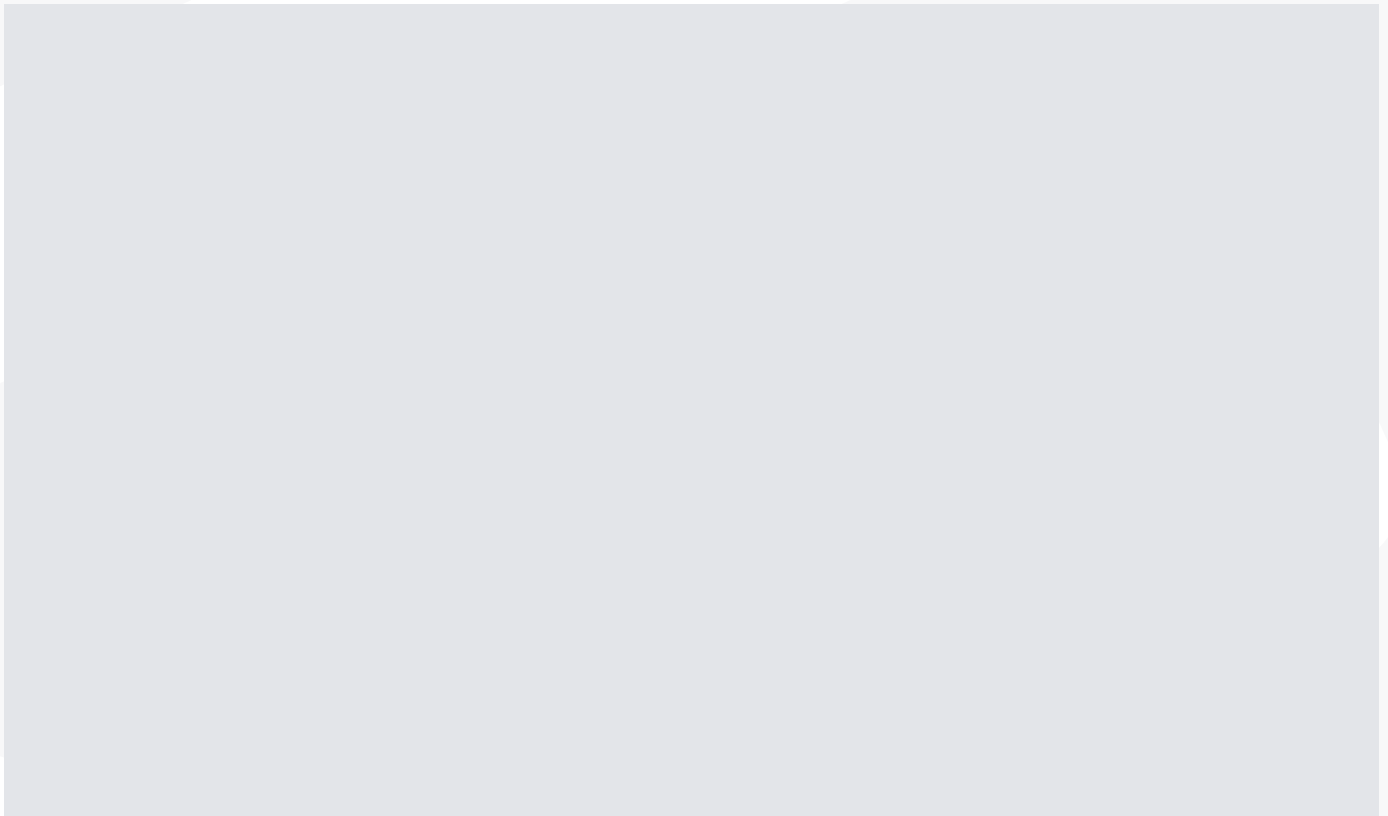
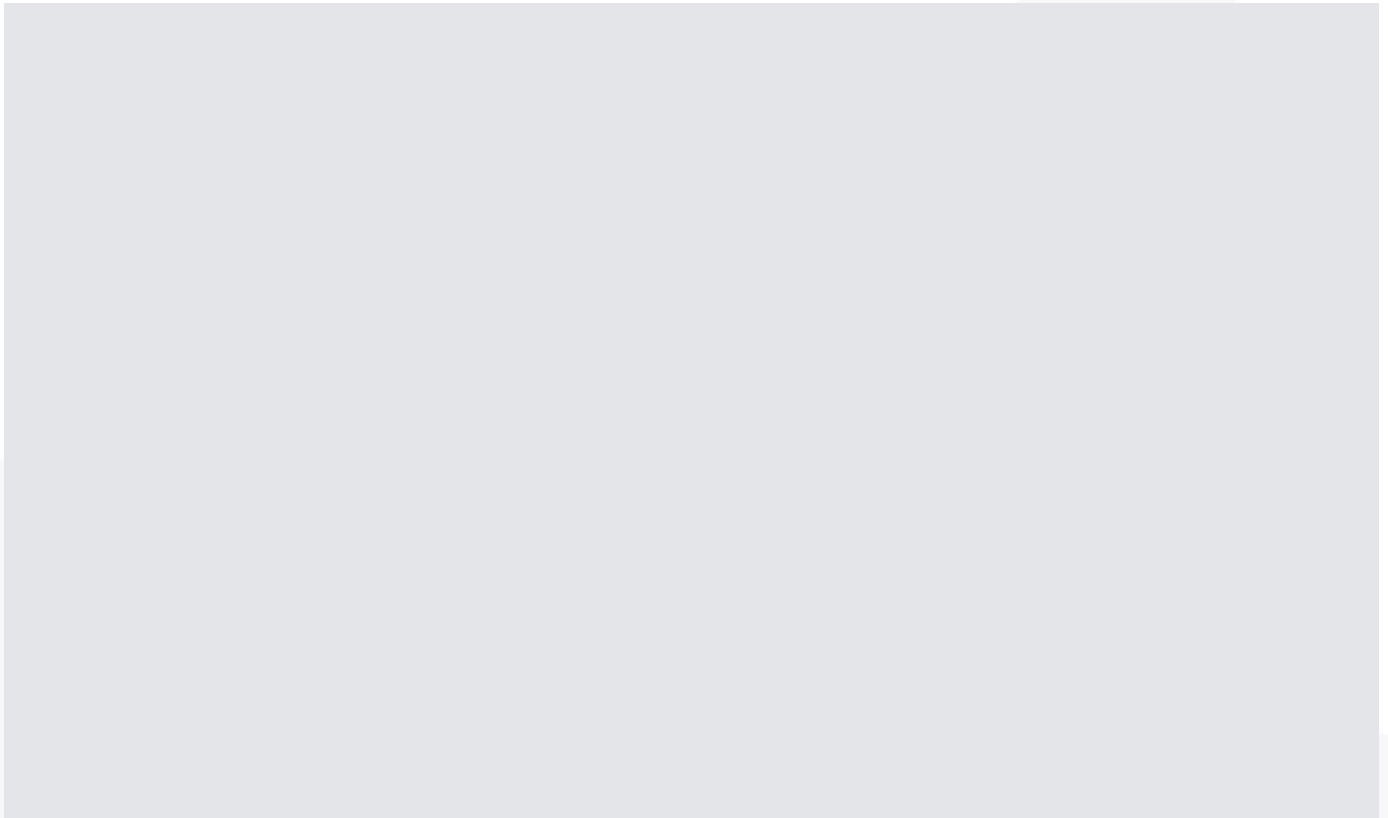
YES

NO

**Reference:**

Errors caused by wear, incorrect use, or inadequate maintenance are not warranted.  
All items must be shipped to Scale Aquaculture AS, Serklauvegen 67, 5440 Mosterhamn.

Upload images:



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