

# FUSION WARRANTY REQUEST FORM

## 25 YEAR LIMITED COMPONENT WARRANTY

**Fusion Installer No.**

Installation Company Name:  
 Installation Company Contact Name:  
 Contact Job Title:  
 Contact Tel No.:  
 Fax No.  
 Email:

Site Company Name:  
 Site Address:  
 Contact Name:  
 Tel No.  
 Email:

Project Start Date:  
 Project End Date:  
 Test Dates:

Type of Building:  
 No. of Comms Rooms:  
 No. of Floors:

No. of Ports tested:  
 Network tested:  
 Cable Tested:  
 Total Number of Ports:

Total Number of Ports:  
 CAT 5 E  UTP

Print Name:  
 Signature of Integrator:  
 Date:

Were Fusion products used for install? YES  NO   
 Fusion Product Order/ Invoice No. :

Tester Mfg. / Model:  
 Internal Project ID:  
 Field Test Report verified by:

**Additional Comments:**

**Fusion Registered Installers on Site:** (Job will not be certified without this information)

Fusion Registered Installer Name	Fusion Installer Registered No.	Signature

Please download and complete in full.

These should be sent by post: F.A.O Fusion Customer Services Fusion Datacom P. O. Box 556 Greenford UB5 9JS  
 Or Fax: 0208 8332600 For enquiries email: fusionwarranty@fusiondatacom.com

*Fusion reserves the right to make a site visit and inspect the installation before a warranty is issued or claimed upon. If an engineer is sent to investigate the site and it is found that the cabling system is not at fault, the customer will be responsible for all the costs incurred (engineer's costs).*