SMOKTECH

Service Request Form Phone: (704) 696-8900

Customer Name		
Customer Address		
City	State	Zip
Phone Number	E-Mail Address	
Date of Birth	Product in Warranty?	□ Yes □ No
Store item was purchased from		
Please describe reason for return:		
Ship product to:		
SMOK Warranty Service 130 Oak Park Dr.		
Suite A		
Mooresville, NC 28115		
This form, along with a copy of the original receipt must be included with your shipment		
Some items may not be eligible for service due to mi premature failure. We reserve the right to deny ar responsible for shipping costs to us, and you underst once we have received your item, and it has been deep	y warranty service. Please check and that you will forfeit your item if	the warranty prior to shipping. You are you do not wish to pay for return shipping
Internal Use Only		
□ Replaced □ Store Credit	t □ Poturned to Custom	or Data Completed: