

Jewelry Retail Warranty Claim Document

Customer Information

Name

Phone

Email

Address

Product Information

Date of Purchase

Receipt/Invoice Number

Product Name / Description

Model / Serial Number

Store/Location of Purchase

Warranty Claim Details

Description of Issue

When did the issue first appear?

Has the item been serviced before?

If yes, please provide details

Office Use Only

Date Received	Processed by	Claim Number	Status

Customer Signature / Date

Staff Signature / Date