

Please Indicate Brand:

A.O. Smith

American

State



Water Heater Service Report

Service Invoice # _____

Parts Credit Replacement Part Service Labor National Accounts

SERVICE CO. NAME, ADDRESS & ZIP CODE			CUSTOMER NAME, ADDRESS & ZIP CODE	
ACCOUNT NUMBER			CUSTOMER PHONE NUMBER ()	
DATE CALL TAKEN	DATE FAILED	DATE SERVICE PERFORMED	ORIGINAL INSTALL DATE	
MODEL NUMBER	SERIES NUMBER	SERIAL NUMBER	COMPLAINT	
WE FOUND ►			PART NUMBER/DESCRIPTION	QTY
ACTION TAKEN ►				

Drive Zone: 1 2 3 4 5 6 7 (circle one)

*Drive Zone Applies only to Commercial Labor Claims

*Drive Zone DOES NOT APPLY to Residential Labor Claims

Metro Zone Area Yes or No (circle one)

Total Repair Time _____ hours

Total Invoice Amount \$ _____

Mail Claim to:

A.O. Smith Water Products Company

Attn: Warranty Claims

500 Tennessee Waltz Parkway

Ashland City, TN 37015

www.hotwater.com

Installation related issues (including "dry fired" elements), improper venting, inadequate combustion air, temperature control adjustments, odorous or discolored water, condensation, problems due to undersizing, too high supply pressures, lack of proper expansion tank, or failure to perform routine maintenance are **NOT COVERED** by warranty.

Service Provider's Signature

THIS FORM MUST BE SUBMITTED WITHIN 30 DAYS OF SERVICE (OR REPLACEMENT)

Make a copy of this Form for your records.