



RGAs Claim Form

Please fill out both pages and email the completed form to technicalsupport@viqua.com for processing.

Lamp Failure Claim:	Controller Failure Claim:
Reference case number: _____	Reference case number: _____
Lamp part number: _____	Controller part number: _____
Date code: _____	Serial number: _____
Purchase date: _____	Purchase date: _____
Symptom: _____	Symptom: _____
_____	_____
Controller part number used with lamp: _____	Lamp part number used with controller: _____
Alarm on controller: _____	Lamp date code: _____
_____	Was a replacement part installed? Yes / No
Controller serial number: _____	Did it fix the problem? Yes / No
Was a replacement part installed? Yes / No	Replacement part number: _____
Did it fix the problem? Yes / No	Replacement part serial number: _____
Replacement lamp part number: _____	
Replacement lamp date code: _____	
* The date code would be located on the lamp beside the Hg symbol and be in the following format: #####-L###.	

Dealer Contact information

Company Name: _____

VIQUA Customer ID: _____

Branch Address: _____

Contact Name: _____

Email address: _____

Phone number: _____

Requested compensation (please check one) Credit Replacement

For additional assistance or for a case number, please contact VIQUA's Technical Support Team while on site at **1-800-265-7246 EXT 335**. You can also email the Technical Support Team at **technicalsupport@viqua.com**