

Trulife Limited Warranty • Prosthetic Warranty Card

Trulife warrants each of its prosthetic devices, subject to conditions below, to be free from defects in material and workmanship under normal use, service, and proper installation, for the time period specified below:

Item Type	Models	Warranty Period	Warranty Begins From
Prosthetic Components	All models (except feet & repairs)	Two (2) years	Date of installation
SACH, Natural, Lightfoot2, Kinetic Light, Kinetic	SCH11/12; SNF16/17; SLF19; SKF10; SKF20	Two (2) years	Date of installation
Energy, Kinetic Edge, Zumo	SEF19; SKF30; SZM45	Keel: Two (2) years Cosmesis: Six (6) months	Date of installation
Solas, Triumph, Zenith LP, Zenith	SLS49, STF19; SZN10; SZN20	Keel: Three (3) years Cosmesis: Six (6) months	Date of installation
Prosthetic Repairs/Refurbs	All repairable models	Ninety (90) days	Date of repair/refurb

If failure of a purchased product occurs during this period because of a defect in material or workmanship, upon satisfaction of the conditions set forth below, Trulife will replace, repair, or refund the product at no charge to the original retail purchaser. Your sole and exclusive remedy, as the original retail purchaser, in the event of a defect is found, is expressly limited to replacement or repair of the product, although Trulife may elect to refund, not to exceed the purchase price, rather than replace or repair the product. Replacement products are warranted for only the remainder of the original warranty period. Warranty is nontransferable and may only be exercised by the original purchaser.

The limited warranty contained herein is in lieu of all other written or express warranties. Any implied warranty, including the implied warranties of merchantability or fitness for a particular purpose, is limited in length to the duration of this limited warranty. Some states do not allow limitation on how long an implied warranty lasts, so the above limitation may not apply to you.

Trulife's sole responsibility is to replace, repair, or refund as stated herein, and Trulife shall not be liable for any special, indirect, or consequential damages including loss of time, inconvenience, loss of the use of the product, or commercial losses. Some states do not allow the exclusion or limitation of incidental or consequential damages, so the above limitation or exclusion may not apply to you.

This warranty gives you specific legal rights, and you may also have other rights which vary from state to state.

Trulife maintains confidentiality with any and all information supplied on the registration card.

Keep this portion of card for your records. Invoice # _____ Date _____

Return Authorization # _____



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Thank you for purchasing this Trulife product. Should you find it necessary to return this product, please fill in this warranty card and return it with the proof of purchase and the product to the point of purchase, to be sent to Trulife. If purchased directly from Trulife be sure to obtain a Return Authorization number from Trulife. Failure to do so will result in delay of processing your request.

Item purchased from	Trulife <input type="checkbox"/> Yes <input type="checkbox"/> No	Invoice # _____
	Other (please specify) _____	
Patient ID #	_____	
Practitioner Name	_____	
Contact Name	_____	Tel # _____
Product Code	_____	Size _____ Side _____ Keel _____
Installation Date	_____	Incident Date _____
Patient Information	Weight _____	Impact level (check one)
	Serial # _____	<input type="checkbox"/> Low (walking with aid)
	Bilateral User <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Med-Low (limited walking)
	Limb Length <input type="checkbox"/> AK <input type="checkbox"/> BK	<input type="checkbox"/> Med (walking only)
	<input type="checkbox"/> SYMES	<input type="checkbox"/> Med-Hi (light sports, jogging)
		<input type="checkbox"/> High (running, active sports, farming, or equivalent)
Reason for return	_____	
Activity at time of incident	_____	
Return Authorization #	_____	

Trulife Limited Warranty • Additional Conditions on Applicability

Trulife shall have no obligation under the limited warranty until and unless the following additional conditions are met:

- The product is installed and maintained under the direction of a Certified Medical Practitioner and in accordance with the published installation and user guide;
- The product is returned to the original place of purchase along with this warranty card filled out completely and proof of purchase;
- Trulife has not tested and does not warrant the use of its products in combination with products not manufactured by Trulife. It is possible that such use may cause failure and/or breakage, which may cause injury.

NOTE: Products returned to Trulife become the sole property of Trulife and may be destroyed during analysis or evaluation. Product returned to Trulife will not be sent back to the purchaser, purchaser's agent, or patient if destructive evaluation methods are used.

Certification

This warranty card must be signed by the Certified Medical Practitioner in charge.

I certify that all conditions of the warranty, including the additional conditions on applicability of limited warranty, are met.

Signature _____ Date _____

Contact Trulife Customer Service for a Return Authorization number:

US Customer Service	International Customer Service	Canada Customer Service
Tel: 800.492.1088 Fax: 800.245.3765	Tel: 360.697.5656 Fax: 844.318.1114	Tel: 800.267.2812 Fax: 613.392.4139

PLEASE INCLUDE THIS PORTION OF THE CARD WITH PRODUCT WHEN SUBMITTING THE RETURN