

WARRANTY CLAIM FORM



All information is required.

NAME _____

ADDRESS _____

EMAIL _____

HOME PHONE _____ CELL PHONE _____

Date of purchase _____ Place of purchase _____
(Month, Year)

Style number _____
(located on product tags, or check our website to match your item)

Color _____ Size _____

Reason for warranty claim (please describe the problem and leave a brief description of how the damage occurred.)

Customer signature _____ Date _____

Once the warranty form has been completed, you may submit your form via email, mail, or fax.

Phone : 310-233-2950
Fax : 310-233-2959
Email : customerservice@olympiausa.com

Your claim will be evaluated by upper management, who will deem your product to be in or out of our Olympia warranty policy in which you will be notified within 5-7 business days.

Olympia International, Inc.
19600 S. Vermont Avenue
Torrance, CA 90502