

MÄCHTIH KITCHENWARE WARRANTY CLAIM FORM

Please fill out all parts of this form. Please note, areas with * marks a required field. Submit warranty claim form to Info@Machtigkitchenware.com with the subject line "Warranty Claim"

You must attach original proof of purchase (invoice) to process your request.

*FIRST NAME	
*LAST NAME	
*EMAIL:	
PHONE:	

SHIPPING ADDRESS FOR REPLACEMENT:

*NAME	
*STREET ADDRESS	
ADDRESS LINE 2	
*CITY, STATE	
*ZIP CODE	

PRODUCT INFO

*ITEM NAME	
*SKU	
*COLOR	
*WHAT IS DEFECTIVE?	

Please send your item back to:

**MÄCHTIG KITCHENWARE WARRANTY
1000 AXINN AVENUE SUITE H815
GARDEN CITY, NY 11530**