



## AMBIENCE AIR SITE ASSESSMENT / WARRANTY CLAIM FORM

In order to assess your site assessment or warranty claim please complete, sign and return this form to Ambience Air via email; [aftersales@ambienceair.com.au](mailto:aftersales@ambienceair.com.au), or by post; Ambience Air, 53 Discovery Drive Bibra Lake WA 6163

### TROUBLESHOOTING CHECKLIST

Prior to submitting a request or claim, please complete the following basic troubleshooting items to test if any of these rectify your issue. Once complete, please check the box to indicate you have completed the steps.

- PERFORMED HARD RESET** – Turn off your system via your meter box for 30min.
- CLEANED FILTER(s)** – Cleaned the return air filter
- RUN FAN MODE** – Run your system on fan mode for 5min before changing to cooling / heating
- UPDATED CONTROLLER** (Zone10, Ezone, Myair) – Call 6253 0181 for Advantage Air tech support
- LIMITED ZONES** [Zoned Systems Only] – Turned off all zones except for the zone with an issue
  
- Photo's taken of error, controller settings, or any visible issue (optional)
- Video taken for any audio, or visual issues (optional)

### CONTACT INFORMATION

We require contact information to ensure we have your most recent and valid contact details, to allow us to put you in contact with our team of trades, supervisor, or warranty agent to attend your issue.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

BRAND OF SYSTEM: \_\_\_\_\_

TYPE OF SYSTEM: \_\_\_\_\_

SYSTEM SERIAL #'s: \_\_\_\_\_

DATE OF PURCHASE: \_\_\_\_\_

INVOICE / CONTRACT NUMBER: \_\_\_\_\_

**ISSUE / CLAIM INFORMATION** (check all applicable)

Warranty Claim     Installation Issue     Site Inspection Request     Other (please specify)

**DETAILED DESCRIPTION OF PROBLEM AND/OR ANY FAULT CODES**

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**DEBIT/CREDIT CARD DETAILS**

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

**BY SIGNING AND SUBMITTING THIS FORM, YOU UNDERSTAND AND AGREE THAT IN THE EVENT THE ISSUE IS NOT DEEMED TO BE AT FAULT OF AMBIENCE AIR'S, UNDER LABOUR OR MANUFACTURERS WARRANTY, A CALLOUT FEE MAY BE CHARGED AND/OR ANY ADDITIONAL WORKS.**

Signed by Customer: \_\_\_\_\_

Date: \_\_\_\_\_

**\*ALL FIELDS ARE REQUIRED TO BE COMPLETED IN ORDER TO PROCESS YOUR WARRANTY CLAIM\***