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FORM FOR REPLACING MISSING OR DAMAGED PARTS

Model number of product: _____

Store or website where product was purchased: _____

Store location: _____

Purchase date / Delivery date: _____

How many boxes were received?: _____

Damages noted on delivery receipt? YES / NO

How were the box(es) closed when you received them?: with straps with tape others _____

Manufacturer code on the roof (ex. MAS-OS 12345) _____

For the roof, you will find the code on a white label sewn inside the roof next to the window

Manufacturer code on the box (ex. G2929) _____

For the structure, the G code and the weight can be found on a white label on the boxes.



Weight of the boxes: Box A : _____ Box B: _____ Box C: _____ Box D: _____

Name, phone, and shipping address:

To the store To the client

Name _____

Address _____

Tel. _____

Extra pieces received??:

Part # _____ Qty _____

Part # _____ Qty _____

Part # _____ Qty _____

***Please provide pictures of the installed shelter, of all six sides of the boxes including the white labels, of the labels on the roof and of the damage.**

Part #	Qty	Description	Missing/Damaged?
			M ou D
			M ou D
			M ou D
			M ou D
			M ou D
			M ou D
			M ou D

I attest that I have read the instructions and verified all pieces received, and the pieces listed above are the only items damaged or missing.

Signature: _____

Date: _____