

SMARTCONDUIT WARRANTY CERTIFICATION APPLICATION FORM

TO BE COMPLETED BY THE INSTALLER

Installer Details		Site Details		
Name:		Owner Name:		
Address:		Site Name:		
		Site Address:		
Distributor:		Installation Date:		
The Product Warranty only becomes effective upon completion and return of this form				
within 30 days from site installation to:				
NUPI Industrie Italiane S.p.AVia dell'Artigianato 13-40023 Castel Guelfo di Bologna-ITALY				
PIPING SYSTEM				
Please indicate the relevant information with an "x":				
Size(s) of pipe installed:		□ DN40 □ DN90		□ DN50 (1 ½") □ DN110 (4")
Fitting Type:	□ Electrofus	ion □ Mecha	ınical	
I hereby certify that the above information is correct, that I am a certified SMARTConduit Qualified Installer (Smartcard no) and that this installation has been carried out as per the correct installation procedure for SMARTConduit Piping System.				
Installer's Signature: Date:				
Italian Law No.196/2003 makes provi and confidential and will not be acce data included or attached to this form.	ssible to other pa			

Installer's Signature: