${\sf SMOKTECH}$

Service Request Form Phone: (704) 696-8900

Customer Name		
Customer Address		
City	State	Zip
Phone Number	E-Mail Address	
Date of Purchase		
If there is no stock in the	color of your item,would you lik	e to accept a replacement with other
color?	☐ Yes ☐ No	
Store item was purchased	from	
Please describe reason for	return:	
,		
Ship product to:		
SMOK Warranty Service		
130 Oak Park Dr.		
Suite A		
Mooresville, NC 28115		
This form, along with	a copy of the original receipt mu	st be included with your shipment
Some items may not be e	ligible for service due to misuse, o	damage, or other failures caused other
than by manufacturer de	fects or premature failure. We re	eserve the right to deny any warranty
		re responsible for shipping costs to us,
•	•	not wish to pay for return shipping
once we have received yo		at it is not covered under warranty.
	Internal Use Only	
☐ Replaced [☐ Store Credit ☐ Returned to C	ustomer Date Completed: