

# WARRANTY REGISTRATION FORM

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Fax or email the completed form below within thirty (30) days of installation of Principal Sloan signage products to begin the Warranty Period as defined under the Standard Limited Warranty located at [www.PrincipalSloan.com](http://www.PrincipalSloan.com). If this form is not returned within the specified period, then the effective date of coverage will be the manufacture date code of the product. Please reference [www.PrincipalSloan.com](http://www.PrincipalSloan.com) for a complete warranty coverage statement on all products.

## Installation information

**Case#** \_\_\_\_\_  
Provided by Principal Sloan

Installation/site location name: \_\_\_\_\_ Original install date: \_\_\_\_\_  
(MM/DD/YYYY)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Operating hours: \_\_\_\_\_ Hours/day: \_\_\_\_\_ Days/year: \_\_\_\_\_

Installation company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sign company: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Distributor: \_\_\_\_\_ Branch: \_\_\_\_\_ Contact: \_\_\_\_\_

*Please return to Principal Sloan: [warranty@pindustries.com](mailto:warranty@pindustries.com) or fax to 325.227.6841.*

## Types and quantities (part# on label of box)

Principal Sloan product P/N	PO#	Qty	Power supply P/N	PO#	Qty

**Customer service and technical support**  
 🌐 [principalsloan.com](http://principalsloan.com)  
 ☎️ 325.227.4577  
 📍 3490 Venture Dr., San Angelo, TX 76905

