



Defective Part Return Form

Please fill out this form in its entirety, in a new email send it to warranty@partstown.com. Please allow up to 30 days for your claim to process.

If Data tag is illegible please include photo of it.

For all HOSHIZAKI warranty and defective parts claims file it directly on Hoshizaki's website site at hoshizakiamerica.com/support/warranty/

Equipment Manufacturer		Equipment Model Number		Equipment Serial Number	
		Your Information		Equipment Location - End User	
Company Name					
Address					
City					
State					
Zip					
Store Number					
Contact Name					
Telephone number					
Email Address					
Quantity	Part Number	Description of Defect: Please list how part failed.		Price Ea.	
Defective Part Install Date		Defective Part Failure Date		Replacement Date	
Parts Town Invoice or order number, or your PO# (claim cannot be processed without this information):					
Your reference or invoice # (to be supplied on your credit memo):					

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My unit is still covered by the original MFG warranty.

WC# _____

Please return only requested items to:

Parts Town - 1200 Greenbriar Drive Addison, IL 60101

warranty@partstown.com