



NOTICE OF CLAIM

(IMPORTANT : State facts fully and fill in all blanks)

I, LITO GONZALES, of legal age, with residence at 105 VICTORIA VILLAGE
(Name of Appliance Owner)
MAGAWANES VILLAGE MAKATI CITY

state the following facts :

1. I am the owner and holder of Warranty Extension Policy/Contract No. _____ covering the appliance more particularly described as follows :
BRAND : KOLIN PRODUCT : WINDOW TYPE AC
MODEL NO. KAG-10ACMV SERIAL NO. 19011001-4820
2. The appliance described above was used solely in the household and/or personal purposes and not for business or any use that generates income.
3. On _____ at about _____ AM/PM, I
(date) (time)
noticed that my appliance _____
(describe what happened to appliance)
4. My appliance is located in the _____ of our residence.
(area of location of appliance)
5. I hereby declare that the foregoing statements are true and that I have not withheld any information within my knowledge connected with the malfunction described above.

10/25/19
Date

ANCELITO GONZALES
Print Name & Sign
(Appliance Owner)