

Pride Outdoor Services

Plant Warranty Claim Form

Thank you for choosing Pride for you landscaping needs! We hope that you are enjoying your landscaping project aside from the issue that you are contacting us about. We understand that sometimes defects happen, and we would love to help! The following form must be filled before the issue can be resolved. Please mail all completed forms to P.O Box 757, Savoy, IL 61874 or email it to office@pride-outdoor.com and include "Plant Warranty Claim" in your subject line. Thank you for your patience as we promptly address your claim!

PERSONAL INFORMATION	
First Name	
Last Name	
Address	
City, State, ZIP Code	
Email	
Phone Number	

Date of product installation (date on invoice): _____

Product Information & Complaint

Invoice Number:		# of plants that need replaced:	
Warranty, if known (please circle):	3 month / 1 year	(For office use only) Resolved:	Yes / No Date:
Description of the type of damage, care routine, and name(s) of the plants that need replaced. (You may write on a separate sheet.)			

Make a copy of this form for your records.

Present this form, and pictures, if any, to Pride Outdoor Services, LLC.

The authorized dealer will then submit all the documentation for a review.

You will be contacted with the results of the investigation within 30 days via email or phone call.

Customer Signature

Date

For office use only:	
Reviewed by	Date Received

Please use this page to write any additional information or notes:

A large, empty rectangular box with a thin black border, occupying most of the page below the instruction. It is intended for the user to write any additional information or notes.