

# Rigel Cabinetry Warranty Claim Form

62306 NEEDHAM RD, BURR OAK, MI 49030

[info@rigelcabinetry.net](mailto:info@rigelcabinetry.net)

1-866-787-0810

Please complete this form and email to [info@rigelcabinetry.net](mailto:info@rigelcabinetry.net), along with relevant photos.

Missing Items       Freight Damage       Concealed Damage       Manufacturing Defect

Date: \_\_\_\_\_      Contact Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

Address: \_\_\_\_\_      City: \_\_\_\_\_

State: \_\_\_\_\_      Zip: \_\_\_\_\_

Delivery Address: \_\_\_\_\_      City: \_\_\_\_\_

State: \_\_\_\_\_      Zip: \_\_\_\_\_

Order/Invoice Number: \_\_\_\_\_      Customer PO: \_\_\_\_\_

Assembled?    Yes     No

No.	Cabinet	Quantity	Reason
1			
2			
3			

To successfully process your warranty claim, it's essential to provide a minimum of two (2) photographs for each damaged or defective item. These should include one (1) close-up photo to clearly show the damage or defect, and another taken from a distance of about three (3) feet to provide context. Please ensure to submit these photographs within 72 hours following the receipt of your order.

Rigel Cabinetry will commence the processing of your warranty claim promptly upon receipt of a completed and signed claims form, along with the required photographs. After your claim is verified and approved, we will endeavor to supply a replacement item as swiftly and efficiently as possible. Please note that Rigel Cabinetry may request further information or documentation to fully assess any claim.

Customer Signature: \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY\*\*\*\*\*

Claim Inspected by: \_\_\_\_\_

Approved? Yes       No

Manager Signature: \_\_\_\_\_