

ZEROFLUSH URINAL REGISTRATION FORM

Please use this short and simple form to register your ZeroFlush Urinal so that we have a record of your purchase. Failure to complete this form does not diminish your warranty rights but will aid us in your future service. Please email or post this form to Aquatemp Environmental Solutions, PO Box 1371, Paradise Point 4216 or email enquiries@aquatemp.com.au

Installer Details

First Name _____

Surname _____

Plumbing License number _____

Company _____

Phone _____ Fax _____

Email _____

Street Address _____

Suburb _____

State _____ Postcode _____

Site Details

First Name _____

Surname _____

Company _____

Phone _____ Fax _____

Street Address _____

Suburb _____

State _____ Postcode _____

Installation Type

New Building ☐ Retrofit ☐

Renovation ☐ Other _____

Urinal Type

Model	Quantity	Quantity	Quantity
ZF-101	_____	ZF-301	_____
ZF-201	_____	ZF-501	_____
		ZFT1200	_____
		ZFT1400	_____