



# APPLICATION TO TRANSFER WARRANTY

(Note: an accepted transfer covers any remaining period of the original warranty for the tank on the original site and is bound by the conditions of that original warranty offered)

**Original** Owners name: \_\_\_\_\_

Address / Location of tank: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

Tank Model: \_\_\_\_\_

Capacity: \_\_\_\_\_

Colour: \_\_\_\_\_

Date Purchased: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Invoice No: \_\_\_\_\_

Purchased From: \_\_\_\_\_

Installed by: \_\_\_\_\_

**New** Owners name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Mobile: \_\_\_\_\_

Fax: \_\_\_\_\_

Please attach all the following photographs:

General location of tank

Location of inlet(s)

Location of overflow(s)

Overflow pipe(s) and distribution

Outlet fitting(s)

Flexible connection (to pump)

Complete the following:

Size of Inlet(s)? \_\_\_\_\_ Diameter

Size of overflow(s)? \_\_\_\_\_ diameter

Pump line size? \_\_\_\_\_ Diameter

Pump size? \_\_\_\_\_ litres/hr

Foundation type and thickness \_\_\_\_\_

Is the foundation contained? YES / NO

Is the tank fenced from livestock? YES / NO

Is a breather fitted to tank? YES / NO

Obvious Marks, Cuts or Dents? \_\_\_\_\_

Additional holes drilled? YES / NO

Damage to top of Dome Roof? YES / NO

Is the tank shaded? YES / NO

Galloway International Limited, P O Box 58-632 Botany, Auckland 2163

Transfer approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Position: \_\_\_\_\_

Signed: \_\_\_\_\_