




WARRANTY CARD

PORTABLE TIRE INFLATOR

Your details: _____

Name: _____

Address: _____

 _____ Email: _____

Date of purchase* _____

* We recommend you keep your receipt with this warranty card

Location of purchase: _____

Description of malfunction:



If you have a malfunction please contact our Customer Service department and send this completed warranty card with receipt to:

EuroCentra, Inc.
801 Circle Ave.
Forest Park, IL 60130
service@801service.net

AFTER SALES SUPPORT 44630

  **866 558 8096**

 **service@801service.net**

06/2019

Hotline:
866-558-8096

Operating Hours:
Monday - Friday
10 am - 6 pm EST

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YEAR WARRANTY