

AFFIX
FIRST CLASS
POSTAGE
STAMP
HERE

SERIAL NUMBER _____

MODEL NUMBER _____

DATE PURCHASED _____

PURCHASED FROM _____

ADDITIONAL INFORMATION

CUT HERE & RETAIN FOR YOUR RECORDS



**Alan
Manufacturing
& Supply**
1085 MANHEIM PIKE
LANCASTER, PA 17601

Warranty Card 2021



**Alan
Manufacturing
& Supply**
1085 MANHEIM PIKE, LANCASTER, PA 17601
1-800-724-8548 www.Alanwater.com

RECORD OF PURCHASE CARD
Save time & money! Use our website www.alanwater.com
IMPORTANT NOTICE
This card must be returned within (10) days of purchase to register your warranty.
PLEASE PRINT Thank You.

Model No. _____
(Must Specify)

Your Name _____ E-mail Address _____ DATE OF PURCHASE: Mo. _____ Yr. _____

Address: _____
Street City Prov. & Postal Code

Telephone Number: (____) _____

Dealer's Name: _____

Dealer's Address: _____
Street City Prov. & Postal Code

1. Where is this unit to be used?

- | | | | | | |
|--|--|--|--|---|--|
| A <input type="checkbox"/> Apartment | B <input type="checkbox"/> Home | C <input type="checkbox"/> Farm | D <input type="checkbox"/> Motel/Hotel | E <input type="checkbox"/> Cottage | F <input type="checkbox"/> Boat |
| G <input type="checkbox"/> Condo | H <input type="checkbox"/> Business | I <input type="checkbox"/> Trailer/Mobile | J <input type="checkbox"/> Restaurant | K <input type="checkbox"/> Coffee Service | L <input type="checkbox"/> Institutional Kitchen |
| M <input type="checkbox"/> Vending Machine | N <input type="checkbox"/> Convenience Store | O <input type="checkbox"/> Other (specify) _____ | | | |

2. What type of store was this unit purchased?

- | | | | | | |
|-------------------------------------|---|---|--|---|---|
| A <input type="checkbox"/> Plumbing | B <input type="checkbox"/> Hardware | C <input type="checkbox"/> Farm | D <input type="checkbox"/> Water Treatment | E <input type="checkbox"/> Lumber/Home Center | F <input type="checkbox"/> Department Store |
| G <input type="checkbox"/> RV Sales | H <input type="checkbox"/> Food Service Sales | I <input type="checkbox"/> Vending Supply | J <input type="checkbox"/> Other (specify) _____ | | |

3. What attracted your attention to this unit?

- | | | | | |
|--|---|---|--------------------------------------|---|
| A <input type="checkbox"/> Store Display | B <input type="checkbox"/> Newspaper Ad | C <input type="checkbox"/> Magazine Ad | D <input type="checkbox"/> Catalogue | E <input type="checkbox"/> Plumber's Recommendation |
| F <input type="checkbox"/> Friend's Recommendation | G <input type="checkbox"/> Yellow Pages | H <input type="checkbox"/> Other(specify) _____ | | |

4. What water problem are you trying to solve?

- | | | | | | |
|---|--------------------------------------|--------------------------------------|---|--|--|
| A <input type="checkbox"/> Dirt | B <input type="checkbox"/> Rust | C <input type="checkbox"/> Algae | D <input type="checkbox"/> Chlorine Taste or Odor | E <input type="checkbox"/> Sulphur Taste or Odor | F <input type="checkbox"/> Iron |
| G <input type="checkbox"/> Hard Water/Scale | H <input type="checkbox"/> Corrosion | I <input type="checkbox"/> Chemicals | J <input type="checkbox"/> Microbiological Contaminants | K <input type="checkbox"/> Pool/Spa Treatment | L <input type="checkbox"/> Other (specify) _____ |

5. Filtered water needed primarily

- | | | | | |
|--|---------------------------------------|--|------------------------------------|--|
| A <input type="checkbox"/> Drinking | B <input type="checkbox"/> Beverages | C <input type="checkbox"/> Cooking | D <input type="checkbox"/> Laundry | E <input type="checkbox"/> Health or Medical Reasons |
| F <input type="checkbox"/> Shower/Bath | G <input type="checkbox"/> Toilet | H <input type="checkbox"/> Ice Machine | I <input type="checkbox"/> Coffee | J <input type="checkbox"/> Post Mix |
| K <input type="checkbox"/> Vending Machine | L <input type="checkbox"/> Humidifier | M <input type="checkbox"/> Other (specify) _____ | | |

6. What is your water source?

- | | | | | | |
|-----------------------------------|---|--|---------------------------------------|------------------------------------|--|
| A <input type="checkbox"/> Public | B <input type="checkbox"/> Community Well | C <input type="checkbox"/> Your Own Well | D <input type="checkbox"/> Lake/River | E <input type="checkbox"/> Cistern | F <input type="checkbox"/> Other (specify) _____ |
|-----------------------------------|---|--|---------------------------------------|------------------------------------|--|

7. Do you have any other water treatment products? (specify) _____

8. Who installed your unit?

- | | | |
|-------------------------------------|------------------------------------|----------------------------------|
| A <input type="checkbox"/> Yourself | B <input type="checkbox"/> Plumber | C <input type="checkbox"/> Other |
|-------------------------------------|------------------------------------|----------------------------------|

9. Unit purchase price _____ Installation cost _____

10. Do you have, or use, bottled water?

- | | |
|--------------------------------|-------------------------------|
| A <input type="checkbox"/> Yes | B <input type="checkbox"/> No |
|--------------------------------|-------------------------------|

11. Was this unit purchased to replace bottled water?

- | | |
|--------------------------------|-------------------------------|
| A <input type="checkbox"/> Yes | B <input type="checkbox"/> No |
|--------------------------------|-------------------------------|

SERIAL NUMBER

REQUIRED FOR WARRANTY

See owner's manual for complete warranty information.



**Alan
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& Supply**
1085 MANHEIM PIKE, LANCASTER, PA 17601
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LIMITED WARRANTY POLICY

Manufacturer warrants the ultraviolet water sterilizer's hardware and electrical systems to be free from defects in materials and workmanship for a period of five (5) years from the date of purchase by the original owner (consumer) on a pro-rated basis. Manufacturer warrants the ultraviolet lamps and sensor probes to be free from defects in material and workmanship for a period of one (1) year and the reactor chamber for a period of seven (7) years. The warrantor will at its option and expense either repair or replace such units subject to the following conditions, exceptions, and exclusions. No other warranties with respect to the units other than those expressly included in this one year warranty have been made by the Warrantor.

Alan Manufacturing Water Treatment Products are warranted to be free from defects in material and workmanship for a period of five (5) years on control valves, five (5) years on brine tanks, & (10) years on mineral tanks from the serial number date. Within the warranty period we shall repair or replace such products which are returned to us with shipping charges prepaid and are determined by us to be defective. This warranty will not apply to any product subjected to misuse, negligence, or accident; or misapplied; or modified or repaired by unauthorized persons; or improperly installed.

The provisions of the above warranties are our sole obligation and exclude all other remedies or warranties, expressed or implied, including warranties of merchantability and fitness for a particular purpose, whether or not purposes or specifications are described therein. We further disclaim any responsibility whatsoever to the customer or to any person for injury to person or damage to or loss of property or value caused by any product subjected to misuse, negligence, or accident; or miss-applied; or modified or repaired by unauthorized persons; or improperly installed.

WARRANTOR SHALL NOT BE LIABLE FOR ANY INCIDENTAL OR CONSEQUENTIAL DAMAGES.

CERTAIN CONDITIONS, EXCEPTIONS, AND EXCLUSIONS APPLY CONTACT OUR OFFICE FOR A COMPLETE LISTING

RETAIN THIS COPY FOR YOUR RECORDS

Warranty Card 2021

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