

REQUEST FOR SERVICE

CUSTOMER CODE:

*****FORM MUST BE COMPLETED IN IT'S ENTIRETY*****

DATE: _____

CUSTOMER NAME _____

(LAST)

(FIRST)

ADDRESS _____

(STREET)

(CITY) _____

(STATE)

(ZIP)

PHONE _____

(HOME)

(DAYTIME NUMBER)

REQUIRED: A COPY OF YOUR PROOF OF PURCHASE, AS THE WARRANTY IS FOR THE ORIGINAL PURCHASER ONLY.

PLEASE INDICATE WHICH ITEM YOU ARE HAVING A PROBLEM WITH:

() Mattress

() Box spring

() Both

BEDDING INFORMATION: (Please locate your law tag for the following information)

Date Made: _____

Warranty Code: _____

Manufacturer: _____

Model Name: _____

Size: _____

SALES RECEIPT INFORMATION: (Please locate your receipt or proof of purchase for the following information) Please attach a copy of your receipt/proof of purchase.

Date of Purchase: _____

YOUR MATTRESS SET:

In this section you will need to tell us more about the concerns you are having with your sleep set. Please be specific as you possibly can so we can accurately and quickly process your claim. On the attached diagram please indicate where your problem is and feel free to send along any picture that may help us in processing your claim.

If your concern is with the mattress, please use the following space to describe the problem:

BODY IMPRESSIONS are a natural occurrence on a mattress and should not be confused with a sagging innerspring. An impression up to 1 ½ inches is normal. Body impressions are always there in the morning, as the surface has been depressed for hours. Allow two hours before measuring any body impressions. Impressions are noticeable as early as the first 60 days.

SAGGING, A simple test!

With linens removed, pin a string to the tape edge of the mattress and stretch it tightly across to the other side and pin it again. With a ruler, measure the depth from the lowest spot to the string. (Do not measure into quilt stitch.) Repeat this process across the length of the mattress. Turn the mattress over and measure the other side (if a dual sided mattress). If one side is much worse than the other, it hasn't been flipped and rotated properly. If any depth exceeds 1 ½ inches, please indicate below:

Deepest Impression: _____

YOUR BOX SPRING:

If your problem is with your box spring, please use the following space to describe the problem:

Do you have wood slats or a metal center support on your bed: _____

Was the bed purchased from this store? _____

If so when? _____

Have we replaced any part of your bedding before? _____

If so, please indicate when and for what reason _____
