

SERVICE CLAIM REPORT



All information requested must be complete and legible. CLAIMS WILL NOT BE PROCESSED UNTIL **STEPS 1-4** ARE COMPLETE. Failure to follow these instructions will result in delays or denial of claim.

STEP 1 PLEASE PROVIDE ALL OF THE FOLLOWING INFORMATION:

Company Name: _____ Contact: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

PO#: _____ STAR/OEF Order #: _____

Received Date: _____ Carrier Name: _____

Current Location of Product: _____

STEP 2 PLEASE PROVIDE INFORMATION FOR STAR/OEF ITEM(S) BEING CLAIMED:

ITEM #	PRODUCT NAME	QTY	DESCRIBE ISSUE AND YOUR PROPOSED SOLUTION

Parts Request
 Defect
 Freight Damage
 Concealed Damage
 Wrong Product
 Wrong Quantity
 Other _____

STEP 3 TAKE DIGITAL PHOTOGRAPHS OF 3 P'S

"HEAD TO TOE"



INSIDE & OUTSIDE



DO NOT DISPOSE OF INTERNAL PACKAGING & ORIGINAL CARTON.

UPON REVIEW OF PHOTOS, WE MAY DEEM IT NECESSARY TO ARRANGE FOR AN INSPECTION OF THE FURNITURE TO DETERMINE IF A MANUFACTURING DEFECT EXISTS.

IF YOU DO NOT RESPOND TO OUR INQUIRIES WITHIN **14 BUSINESS DAYS THEN YOUR CLAIM WILL BE DISMISSED.**

STEP 4 E-MAIL THIS COMPLETED FORM TO PARTS@STARINTERNATIONALFURNITURE.COM FOR STAR, CLAIMS@ORIENTEXPRESSFURNITURE.COM FOR OEF, OR FAX TO (949) 635-6983. **DO NOT FAX PHOTOS.**

Approved By:		