

ZLight Warranty Registration

Sign Manufacturer Information

Manufacturer Company:

Contact Name:

Street Address:

City:

State:

Zip Code:

Phone:

Email:

Installer Information

Installer Company:

Contact Name:

Street Address:

City:

State:

Zip Code:

Phone:

Email:

Sign Installation Location

Installation Site Name:

Date of Installation:

Model / Part #:

Street Address:

City:

State:

Zip Code:

Estimated Sign Operating Hours per Day:

Estimated Sign Operating Days per Year:

LED Modules & Power Supply Information

LED Modules

Power Supply

Distributor Order #:

Distributor Order #:

Lot #:

Lot #:

Qty:

Qty:

Email completed form to info@zlighttech.com