

PRODUCT REGISTRATION SLIP / APPLICATION FOR WARRANTY ON MULTIFUEL LINER

SNH INVOICE NUMBER

Name & address of Installer

Address of property
where product installed

Name of Occupier

Date of Installation

Appliance Type

Fuel Type

Diameter of Liner

Length of Liner



PLEASE RETURN TO:

Mi-FLUES LTD

TAYMIN BUSINESS PARK

MITCHAM ROAD

BLACKPOOL

LANCASHIRE

FY4 4QN

FAX NO:01253 600 061 email: sales@mi-flues.com

OFFICE USE ONLY

Registration No.

Customer Account No.

Date Received.