

<b>Warranty Request Date:</b>			<b>Warranty applications may be submitted using one of the 3 options below:</b> <b>Mail:</b> Campus Warranty Superior Essex 6120 Powers Ferry Road, Suite 150 Atlanta, GA 30339-2923 <b>E-mail:</b> Warranties@spsx.com <b>Fax:</b> 800.249.9938		
<b>END USER (WARRANTY HOLDER) INFORMATION</b>			<b>INSTALLATION CONTRACTOR INFORMATION</b>		
Company Name:			Contractor Name:		
Primary Contact Name:			Primary Contact Name:		
Street Address:			Street Address:		
City:	State:	Zip:	City:	State:	Zip:
Telephone:	Fax:		Telephone:	Fax:	
E-Mail Address:			E-Mail Address:		
<b>PROJECT</b>					
Project Name:			Project Manager:		
			Project Manager Phone Number:		
			Project Manager E-Mail Address:		
Project Site Address:			Is Project Manager RCDD certified: <b>YES NO</b> If YES, provide the Project Manager RCDD Certificate Number:		
City:	State:	Zip:	List any other certifications:		
Project Site Phone Number:			Any Remote Site Locations: <b>YES NO</b> If YES, list all locations and contact information:		
Other Contact Information:					
Project Start Date:	Project Completion Date:				
<b>PROJECT DETAILS</b>					
Does the Premises cable portion of the installation account for a minimum of 25% of the total cable purchase value: <b>YES NO</b> If YES, please enclose copy(ies) of the purchase invoices for product eligibility.			Is the structured cabling (horizontal and backbone data) 100% Superior Essex products: <b>YES NO</b> If YES, please enclose copy(ies) of purchase invoices for products eligible for warranty.		
An extended warranty is requested for which products:					
How much (in feet) of each product was installed:					
List Distributor(s) where Superior Essex products were purchased: Please enclose copy(ies) of purchase invoices for products eligible for warranty.					
<b>SIGNATURE OF THE WARRANTY HOLDER IS REQUIRED</b>					
Warranty Holder Signature:			Date:		
<b>REQUIRED ATTACHMENTS</b>					
Test Reports, in native file format, have been included with this application Bill of Materials (BOM) have been included with this application					
<b>SUPERIOR ESSEX USE ONLY</b>					
Superior Essex Approval Signature:		Date:	Version of industry standards in place at time of purchase:		