## **Filter Registration Form**

This form will be filed for future reference. Complete this form and send to sales@sparklerfilters.com. Please answer all questions to ensure form will be processed without complication.

Requestor Information:					
Name:		SPARKLER F Allaying separation anxiet			Sparkler Filters, Inc. Phone: (936) 756-4471
Title:				E-mail: sal	Fax: (936) 539-1165 les@sparklerfilters.com
Company Name:					
Address:			[		
City:		Products to be			
State:		Filtered:			
Zip Code:					
Telephone:					
Fax:					
E-mail:					
Filter Information: Does Filter have the original Filter Serial Number: National Board Number: Filter Model Number: Is there a U Stamp on filter a Location:			r on plate?	<ul> <li>Yes No</li> <li>Not Available</li> <li>Not Available</li> <li>Not Available</li> <li>Yes No</li> </ul>	
Purchase Information:					
Purchased From:		I	Purchase Date		
How did you locate the filte	r and/or dealer؛	?			
Approximate Purchase Price Was an MSDS provided whe			proximate Pu	rchase Price	
Do you own other Sparkler		∏ Yes [	_ No		
Were they purchased from 1			No		
Was this unit purchased to l	be used as a tar	nk or a filter product?	Tank O	nly 🗌 Product	Filter
Information Supplied with I	Filter:				

Sparkler Filters Inc., reserves the right to assess charges for information.