



Ultima Warranty Application Form

To be completed by the Ultima Certified Installer (UCI)

Applicant Details

Name			
Position			
Telephone			
Email			
Company Name			
Address			
		Postcode	
Telephone			
UCI No.			

Project Details

Company/Site Name			
Address			
		Postcode	
Telephone			
Primary Contact			
Telephone			
Email			

Project Start Date		Project Completion Date	
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Number of Installed Links

Copper	Cat5e		Cat6		Cat6A	
Fibre	OM3		OM4		OS2	



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Details of Copper Test Equipment

Manufacturer			
Model Name/Number		Serial Number	
Calibration Date		Software Version	

Details of Fibre Test Equipment

Manufacturer			
Model Name/Number		Serial Number	
Calibration Date		Software Version	

Final Site Certification Checklist attached?	YES		NO	
Are components compliant with intended applications?	YES		NO	
Were the latest installation and test procedures followed?	YES		NO	
Are the full test results attached?	YES		NO	

Signed		Dated	
Print Name			

For Internal Use Only

Date application received		Application approved	YES/NO
Approved by		Date	
Warranty certificate issued	YES/NO	Date	
Valid from		Valid to	