

WARRANTY REGISTRATION FORM

EMAIL:

CUSTOMER INFORMATION

NAME:

ADDRESS:

DEALER INFORMATION	
NAME:	
PURCHASE DATE:	
PRODUCT INFORMATION	
MODEL:	
GAS TYPE:	PLEASE FILL AND RETURN TO:
MODEL:	AMERICAN HEATING TECHNOLOGIES INC.
GAS TYPE:	501 W. GLENOAKS BLVD # 125 GLENDALE, CA 91202
www.luxorGrills.com	,

TEL:

www.LuxurGriii5.Com