

Packaged System LIMITED PRODUCT WARRANTY REGISTRATION FORM

| | Top Portion and Keep Copy A is for YMGI Internal records. Copy B is for Installer to Fill out and Mail back to YMGI. Bottom Copy C for Customer records. | | | | | | | | | | | | |
|----------------------|--|---|-------------------------------|------------------------------|----------|--------|----------|--|--|--|--|--|--|
| For YMGI Use Only | Date: | | Shipping Packing List Number: | Registration Card Serial No. | | | | | | | | | |
| | Installation Invoice Attached to the Registration Card | ŀ | Hired YMGI Recommended | | Warranty | | Warranty | | | | | | |
| | to the Registration Card | | HVAC Contractor/Technician? | Approved | | Denied | | | | | | | |
| | | | | | | | | | | | | | |

| to the Registration Card HVAC Contractor/Technician | | | | n? | Approved D | | | | | | De | enied | | | | |
|--|--------------|--------------------|--------------------------------|---------------------|------------|---|--|---|------------------|------------------|-------------|--|-----------------|------------|------------|---------|
| For Warranty Ap | proval, ar | nd to ensure pi | oper system installation, | your YMGI Pac | ckaged S | yste | m must | be instal | led by | a licensed H | IVAC Ted | chnician o | or a qual | ified ma | aintenance | person. |
| | Unit 1 | | | | | | Unit | 6 | | | | | | | | |
| Unit Serial | Unit 2 | | | Unit | 7 | | | | | | | | | | | |
| Numbers: | Unit 3 | | | | | | Unit | 8 | | | | | | | | |
| Contact at Insta | allation I | Location: | | | | | | | | | | | | | | |
| Name: | | | | | Phone: | | | | | | Fax: | | | | | |
| Address: | | | | | Email: | | | | | | | | | | | |
| City: | | | | | State (Pr | rovino | nce): Cour | | | | try: | | | | | |
| Contact of the | Installin | g HVAC Cor | tractor/Technician: | | | | | | | | | 1 | | | | |
| Technician Full Name | e (Print): | | | | | Ph | Phone: | | | | | Fax: | | | | |
| HVAC Technician's C | Company: | | | | | Em | Email: | | | | | | | | | |
| Company Address: | | | | | Cit | City: | | | | State (P | rovince): | | | | | |
| Currently Licensed/Certified HVAC Technician License or Certification Number: | | | | | | | cense Approved/ ertified by: | | | | | | | | | |
| Official Phone # to C | heck the Li | cense Validity: | | | | | | | | | | • | | | | |
| Checklist for Install | ing HVAC | Technician to V | erify Installation Quality, ar | nd for Warranty P | Processin | g Pu | ırpose (lf | not filled | out con | npletely by tec | hnician, w | arranty wi | ll be voide | ed) | | |
| 1) Did you install the | whole syste | em? If not, pleas | e note below. | | | | 13) The ι | unit is inst | talled w | ith no airflow i | s to be blo | ocked insid | le and out | side of t | he unit? | |
| Yes | | No | % of installation de | one by HVAC tech | nnician. | | | | | | | | | | | |
| 2) What had been do | ne, prior to | your arrival? | -1 | | | | 14) Did you check the drain leakage to make sure | | | | | e no water overflow or leakage will occur? | | | | |
| | | | | | | | | Yes | | | | | No | | | |
| 3) Did you read the U | ser Manua | l and Installation | Instruction, before you starte | ed the installation | ? | | 15) Func | 15) Functions are fully tested. Measured temperatures (probe not touc | | | | | ching ar | ny metal): | | |
| | | | | | | Ì | At cooling | g: | | | | | | | | |
| 4) Who unpacked the | unit and a | ccessory boxes | to check for damage? | | | Ì | indoor return air | | | | | | | °F | | |
| | | | | | | Ì | discharge | e air | | | | | | | °F | |
| 5) Circuit breaker AMP from the panel to the wall outlet | | | | | Ì | outdoor ambient | | | | | | | °F | | | |
| | | | | | | | At heati | ng: | | | | | | | | |
| 6) Wire type, gauge, length from the circuit breaker to the wall outlet/sub-base | | | | | | | indoor return air | | | | | | | °F | | |
| | | | | | | | discharge | e air | | | | | | | °F | = |
| 7) Sub-base brand, model and AMP, if used | | | | | | ĺ | outdoor ambient | | | | | | °F | | | |
| | | | | | | 16) The unit has been installed properly and tested to work properly, no vibration, no leaking | | | | | | | tion, no leakir | ng. | | |
| 8) The wires from circ other appliances | cuit breaker | to the wall outle | t are dedicated for the packa | aged unit or share | d with | | | | | | | | | | | |
| Yes No | | | | | 17) Have | you che | cked all | unit functions | , with the | owner's w | tness, an | d all acc | epted by owr | ier? | | |
| 9) Electrical power V/ | Ph/HZ mea | asured at outlet (| wall or sub-base) | | | | | | | | | | | | | |
| 10) LCDI cord is plugged into the wall outlet or sub-base firmly? | | | | | | 18) Did y | 8) Did you show the owner how to operate the unit and the owner unders | | | | | | nderstar | ids? | | |
| Yes | | | No | | | | | Yes | | | | | No | | | |
| 11) Wall sleeve or grille is old or newly installed (brand/model)? | | | | | ĺ | 19) Do you provide regular one-year free service for this installation? | | | | | | | | | | |
| | | | | | | Ì | | Yes | | | | | No | | | |
| 12) Did you check to make sure the wall sleeve or grille, and unit are firmly secured together? | | | | | Ì | 20) Did y | ou list the | e workir | ng details in th | e invoice a | and leave | a copy wit | th the ov | vner? | | |
| | | | | | | Ì | | | | | | | | | | |
| Installation Finished and Unit Works Successfully. Print Name of Installation HVAC Technician: Signature: Date and time: | | | | | Pr Si | Installation Finished and Unit Works Successfully. Print Name of Owner: Signature: Date and time: | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |

By signing above, I acknowledge the liability and responsibility for any false statement or omission of facts, and I authorize YMGI to verify the details provided above, and make its decision on warranty. I understand our filing or filling out of the warranty card/form DOES NOT imply automatic warranty approval, because warranty is approved only to qualified and successful installations by a qualified HVAC technician. I understand that the warranty (if approved) is a standard 5 year compressor and 1 year parts only, and does not include any labor coverage. I agree to and will follow all the contents contained in the Limited Product Warranty Policy of YMGI, and no other entity, stated in public, including but not limited to manuals, web site, email, etc.

Important Note: A copy of the installing HVAC company's invoice to show all their work details, your payment proof, center copy B of this registration card filled out after a successful installation, all three (3) MUST be mailed together to Warranty Dept., YMGI Group, POB 1559, O'Fallon, MO 63366, for warranty processing. Customer keeps bottom copy C. YMGI will check against copy A that was kept at YMGI.