



New Unit Delivery Start-Up Report

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Instructions: Fill out this form with the appropriate information and return to E.D. Etnyre & Co. (Sales Dept.) within 7 days following the start-up of unit to initiate Warranty Period.

Product: _____ **Model:** _____ **S/N:** _____

Owner: _____ **Dealer:** _____

Address: _____ **Address:** _____

Phone: _____ **Delivery Date:** _____

Operator Name: _____ **Start-Up Date:** _____

List all other persons receiving operation and safety instructions:

Were Operation/Maintenance/Safety & Parts Manuals with unit? _____ (Yes) _____ (No)

Owner/Operator Signature: _____

Factory Representative Signature: _____

Dealer Representative Signature: _____

The signature of the Owner/Operator or other authorized person, acknowledges that the machine delivered is in satisfactory condition, operates satisfactorily, has received instructions in operation and maintenance, has received parts and operators manuals. The Owner/Operator or authorized person also, accepts the responsibility to train or seek training for any additional operators who have not participated in this training.

COMMENTS (Including equipment issues and repairs if needed):

