Application for warranty repair/replacement





Please note that your application should go through the original place of purchase!

Date:						
Name:						
Address:						
Telephone number:			Em	ail:		
1. Purchase date:						
Purchase place (URL/Company name):						
3. Order number:						
4. Product/model:						
5. Estimated time (total hours) of use before problem occurred: 6. Average traction when used:						
7. What happened:						
8. What were you tryin when the problem o						
9. Would you say the p occurred during "no						
10. What in your view fair solution?	would be a					
Please attach a few pictures explaining the problem with this application! We may ask you to ship back the faulted unit for further inspection to evaluate the case, if the pictures don't tell the full story. Thank you - and sorry for the inconvenience! We will evaluate and respond to your application within 48 hours after we receive it.						
DanaMedic Aps & DanaLife ApS - Maglebjergvej 4- DK 2800 Lyngby – Denmark						
Office +45 45 200 300 - Fax +45 45 200 309 - Email: info@@maleedge.com – info@jes-extender.com www.maleedge.com & www.jes-extender.com Timezone: +1 Europe-central, Scandinavia Original inventors of the Penile Traction Method since 1995 - Multiple patents pending, Clinically tested, CE marked						
(Internal handling – do no	ot fill out) Vare	enr.: Ship	o: P	ris:	Sendt:	Komm.: