

## Flygt Equipment Registration Form

Please complete this end user registration form to submit all information regarding Flygt pumps installed on site required to receive important product updates and streamline service procedures.

*Note: For customers with more than 10 pumps, a file containing all serial numbers can be submitted directly*

Municipality Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Serial Numbers (Format example 3127.070-2220068):

Startup Date (If Available):

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