



RENTAL WATER HEATER DELIVERY REQUEST FORM

FAX: 1-866-339-9030

PHONE: 1-866-550-9909

BUILDER NAME: _____

BUILDER CONTACT PERSON: _____

BUILDER PHONE #: _____

REQUISITION DATE: _____

SITE SUPERVISOR PHONE #: _____

SITE: _____

INTERSECTION: _____

CITY: _____

REQUESTED DELIVERY DATE: _____

ACTUAL DELIVERY DATE: _____

						TO BE COMPLETED BY RELIANCE HOME COMFORT		
LOT #	MUNICIPAL/CIVIC ADDRESS	POSTAL CODE	HOME OWNER'S NAME	TYPE/MODEL REQUESTED	SCHEDULED CLOSING DATE	SOLOMON W.O. #	SKU #	SERIAL #

Prior to scheduling delivery, all homes must have completely installed roofing, doors, windows, and permanent stairs to the basement. We also require that the sites are accessible and that no interfering scaffolding is present at time of delivery. Allow 5 days for delivery - all deliveries are Monday to Friday. A signature is required for delivery and charges will be applied for each returned water heater.

I agree, the/all water heater(s) were in good condition when delivered to the above site(s).

REQUESTOR'S NAME _____

REQUESTOR'S SIGNATURE _____

RECEIVER'S NAME _____

RECEIVER'S SIGNATURE _____