



Warranty Claim Form

To initiate your warranty process, please complete this form, which may take approximately 2-3 weeks. It is important to note that your warranty is provided by the mattress manufacturer, not Beautyrest Sleep Gallery. We are committed to assisting you with this process, so please ensure you provide all necessary information, indicated by an asterisk (*). Incomplete submissions may result in delays or denial of your warranty claim. Should you have any questions regarding this form, please reach out to your salesperson for support.

Thank you for your cooperation!

***Today's Date:**

***Customer's Name (as it appears on your receipt):**

***Current Address:**

***Phone Number (including area code):**

***Email Address:**

***Do you have a copy of your receipt?** ____ Yes ____ No

***What location did you purchase your mattress?**

Springfield_____ Hollister_____

***What brand of mattress did you purchase?**

***What is the name of your mattress?**

***Is the label attached to the mattress?** ____ Yes ____ No

***Is the law tag attached to the mattress?** ____ Yes ____ No.

If the law tag is attached, please provide the (manufacture date) & (mattress pattern number), which can be found on the law tag. Also, send in a photo of the law tag.

***Date Manufactured:** _____

***Mattress Pattern Number** (Ex: M90005.70.4322): _____

***Mattress Size: (Check one)**

____Twin ____Queen ____King ____Full ____Twin XL ____California King

***Firmness: (Check one)**

____Firm ____Pillow Top ____Plush ____Hybrid

***Has the mattress ever been moved?** ____ Yes ____ No

***Is the mattress stained?** ____ Yes ____ NO

***If so, please describe the stain:** _____

***Do you use a foundation (boxspring) with your mattress?** ____Yes ____No

***Was your foundation purchased with your mattress?** ____Yes ____No

***Do you use a frame?** ____Yes ____No

***Which one best describes your frame?** (check one)

____Metal Bed Frame ____Wood Headboard, Footboard & Rails ____No Frame
____Used

***Does your frame have a center support?** ____Yes ____No

***Did you purchase your frame with your mattress?** ____Yes ____No

We ask that you provide a picture of your center support if you use a frame. Please take a photo of the center support and frame, and mail it in with this form.

Now we need to know what type of problem you are having with your mattress.

Fill out the information below and be as specific as possible.

***Please select the one that best describes your problem. (check any/all that apply):**

- ☐ Stitching coming undone
- ☐ Squeaky foundation (box spring)
- ☐ Dips or bends around the perimeter
- ☐ Coil/ wire broken
- ☐ Body Impressions
- ☐ *Other

**** Please describe your problem and be as specific as possible:***

***When did you first notice the problem? (Check one):**

- ☐ A few days ago
- ☐ A few weeks ago
- ☐ A few months ago
- ☐ More than 6 months ago

*** Is the problem affecting your sleep?**

____ Yes ____ No

*** If so, tell us how much (check one):**

____ Not Much

____ A little

____ More than a little

____ A lot

To process your warranty claim, we need photographs of the affected area. Please capture an image of the issue and submit it along with this form. Taking multiple photos from various angles will facilitate a quicker review. If your claim pertains to “body impressions”, kindly place a golf ball or a similarly sized object in the deepest part of the impression for the photograph.

Use a straight edge, such as a broom handle, yard stick, etc., and lay it across the impression. Use a ruler or tape to measure the number of inches from the bottom of the impression to the straight edge. Do not measure into the stitch channel of the mattress (this is the natural indentation of the mattress).

See for help in showing indentations:

<https://cdn.nmg-platform.com/sleepgallery/pdf/Warranty-Check-list-update.pdf>

Remember to take off all sheets, comforters, and mattress protectors before taking any pictures.

Mail this form along with pictures to (send to the location you purchased):

Beautyrest Sleep Gallery
1826 E. Independence St.
Springfield, MO 65804

Beautyrest Sleep Gallery
250-A Financial Drive
Hollister, MO 65672

OR

Email them to:

springfield@sleepgallery.biz (Springfield Store Location)

hollister@sleepgallery.biz (Hollister Store Location)

The process typically takes 2-3 weeks, depending on the manufacturer's response time. Please be aware that if your claim is deemed valid, you, as the customer will still be responsible for any delivery costs related to the replacement of your mattress. We appreciate your patience and value your business.

Photos required to send in with Warranty Claim Form:

- ☐ Body impression measurement
- ☐ Full view of mattress showing depth of body impression
- ☐ Full view of foundation (box spring)
- ☐ Full view of frame, including center support
- ☐ Photo of law tags and labels