

**Warranty Claim Form**

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| --- | --- | --- | --- |
| **Claim Date** |  | **Your Name** |  |
| **Date of Purchase**  |  | **Address** |  |
| **Dealer Name** |  |
| **Dealer Address** |  |  |  |
| **Dealer Invoice # or Order #** |  | **Email Address** |  |
| **Are you the original Owner/ Buyer?** |  | **Your Phone #** |  |
|  **Reason for Claim** |  | **Have you claimed****these items before?** |  |
|  | **If yes, under what name was claim filed?** |  |

**Please list the damaged items. Item numbers can be found at www.breezesta.com**

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| --- | --- | --- | --- | --- |
| **Breezesta item #** | **Product Description** | **Color** | **QTY** | **Description of Problem (See next page)** |
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In order for your claim to be processed, please include the following items with this claim form:

1. **Photos of the Damaged Item(s).** Include photo of each furniture item in its entirety in order for us to determine the correct design version, as well as a close up of the damaged area. Please submit at least 2 photos for each furniture item being claimed.
2. **Proof of purchase** in the form of your customer receipt or dealer invoice.

Incomplete information will either prevent claim processing or cause a delay in processing your claim.

[Claim Continues on Following Page]

**By submitting this claim, you (i) agree that your claim will be deemed fully released, discharged and satisfied by any payment you accept. By accepting such payment, you agree that Casual Living Unlimited, LLC, Trigon Plastics, LLC, and Meridian Management Partners, LLC will have no liability to you under any circumstances, (ii) acknowledge and accept that no representations regarding payments have been made and you agree to hold the Company harmless for any claims related to the timing or amounts of any payments, (iii) agree that any claims against the Company shall be determined under Pennsylvania law and must be brought in a court of competent jurisdiction sitting in Lancaster County, Pennsylvania.**

**By submitting this claim electronically or signing this claim, as applicable, I intend to be legally bound by the terms and conditions hereof, including the release, waiver and choice of law and venue provisions set forth above.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submitted by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:

Date:

**General Information**

Casual Living Unlimited, LLC / Breezesta (the “Company”) has sold its assets and ceased operations effective April 14, 2025.

Meridian Management Partners, LLC (“Meridian”) has been engaged to administer outstanding claims and make disbursements to creditors of the Company, including holders of valid warranty claims, to the extent that funds are available for distribution.

To be considered for a distribution, you must submit a claim, with all required accompanying documentation, by [DATE].[[1]](#footnote-1) Claims received after [DATE][[2]](#footnote-2) will not be considered. Claims may be submitted to Meridian electronically or by mail at the addresses set forth below.

Website for electronic submission of claims: [INSERT]

Mailing address for claims: [INSERT]

Meridian may disregard any claim which is incomplete, is not supported by appropriate documentation, or is otherwise improper. Any claims submitted under the limited lifetime warranty must strictly comply with the terms and conditions of the warranty.

After claims are collected, Meridian and the Company will engage in a review of available assets and claims and provide notice to you regarding a determination regarding distributions, if any, to be made on account of your claim(s).

**The information provided herein is intended for informational purposes only and does not constitute a guarantee, promise, or assurance of any kind regarding the timing or amount of payments to be made during the wind down process of the Company.**

**The Company expressly disclaims any liability for the timing, amount, or distribution of payments to creditors or any other parties. The final determination of payments will depend on various factors, including but not limited to the validity of the claim, availability of assets, and compliance with applicable laws and regulations. All parties are encouraged to seek independent legal and financial advice to understand their rights.**

**GUIDE TO DESCRIPTION OF THE PROBLEM**

The Company’s warranty policy was to repair or replace furniture. At this time, no replacement furniture or parts will be shipped. For purposes of evaluating your claim, please help us correctly identify the problem.

In the furniture industry, left and right arms and legs are identified as you are facing the furniture, not as you sit in it. Please provide a photo so we can confirm left or right. Be specific as to the location of the damage on the furniture. If you have a copy of the installation instructions, reference the part name. Otherwise, the terms below and an example of the Shoreline Adirondack Rocker parts are included here for guidance in part identification.

* Arms: Left arm; right arm; under arm support.
* Leg: Front or back leg; right or left leg; all legs; rocker leg.
* Back: Back frame; left side frame; right side frame; back slats; back assembly.
* Seat: Seat frame; seat slats; seat assembly; base assembly.
* Spreader: A poly lumber piece added for support to connect each side or legs.
* Table: Tabletop; table base spreader; end rail such as a perpendicular piece on a tabletop
* Joint: Where 2 poly pieces are joined/ held together (For example: a crack at joint)
* Hardware: Seat slings; swivel mechanism; screws; bolts; propel nuts.

 



1. Notice date + 120 days [↑](#footnote-ref-1)
2. Notice date + 120 days [↑](#footnote-ref-2)