

**DATE:**

## WARRANTY CLAIM FORM

### **CUSTOMER DETAILS:**

COMPANY NAME.....

CONTACT NUMBER.....

EMAIL ID.....

CONTACT PERSON NAME.....

ADDRESS.....

### **INSTALLER DETAILS:**

COMPANY NAME.....

CONTACT NUMBER.....

EMAIL ID.....

INSTALLER NAME.....

ADDRESS.....

INSTALLER QUALIFICATION.....

### **VEHICLE DETAILS:**

MAKE/MODEL.....

VEHICLE REGISTRATION NUMBER..... YEAR.....

ENGINE.....

TYPE OF USAGE.....

IS THE VEHICLE USED FOR TOWING?..... IF YES, WHAT.....

LIST ANY NON FACTORY MODIFICATIONS WITH ENGINE (e.g. ENGINE TRANSPLANTED, TURBO, ECU CHIPPED, OTHER)

.....

DATE OF LAST SERVICE.....

SERVICED BY (NAME & NUMBER).....

DATE OF INJECTOR/PUMP/COOLING SYSTEM SERVICE.....

SERVICED BY (NAME & NUMBER).....

REASON FOR THE ORIGINAL FAILURE.....

.....

REPAIRED BY.....



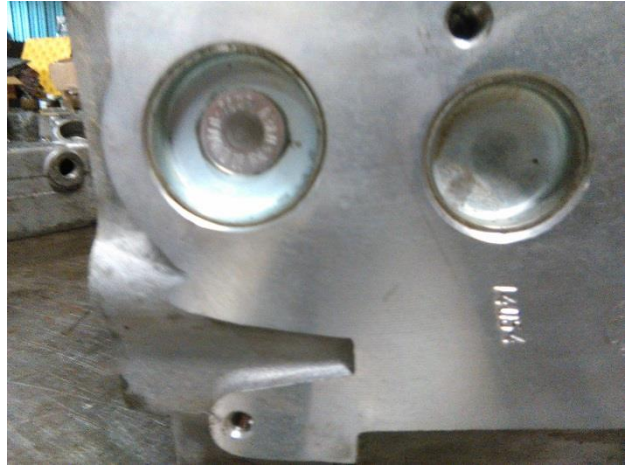


**Example of Images that are needed prior to claim assessment**

**Attachment #1 (Serial number of the head)**



**Attachment #2 (Heat tab & Serial Number together)**



**Attachment #3 (Head casting Number)**



**Attachment #4 (Head surface side image)**



**Attachment #5 (Cam shaft side image)**



**Attachment #6 (Display the fault)**



**Attach more images showing all the faults on product.**