WARRANTY CLAIM FORM	**AUTHORISATION No.**
DATE	
CUSTOMER DETAIL	**VEHICLE DETAIL**
NAME	REG. NUMBER
ADDRESS	MAKE
	MODEL
	CHASSIS NUMBER
	ENGINE NO.
ACCOUNT NUMBER	DATE FITTED
TEL. NUMBER	MILEAGE FITTED
SALES ORDER NUMBER	DATE FAILED
	MILEAGE FAILED
	MONTH USED
	MILEAGE USED
REASON FOR RETURN	
DESCRIPTION: (just faulty or no longer needed is not acceptable)	
PART DETAILS	
PART NUMBER :	
DESCRIPTION :	
INVOICE DATE:	
ANY OTHER DETAILS WE SHOULD KNOW:	
(please attach any proof of warranty claim like garage invioce or fault report)	