



Parts Warranty Return Form

This form needs to be attached to any parts for return BEFORE warranty claim will be started.

Customer Information			
Name:			
Address:			
City:	Province:	Postal Code:	
Unit Information			
Unit #		License Plate #:	
Year:	Make:	Model	
VIN #:			
Part Information			
Part #		Part Name:	
Description of Failure/ Complaint:			
Cause:			
Correction:			
Date of Failure:		KM/ Hours @ Failure:	

Internal (Office) Use Only	
Received By:	Date:
Original Invoice #	Date:
Replacement Invoice #	Date: