



Warranty Claim Form

Warranty Claim Date: _____

Distributor Name _____

Customer Name _____

Contact _____

Contact _____

Direct Phone _____

Direct Phone _____

Service Order/Reference # _____

City/State _____

Equipment Model # _____

Serial # _____

Total Hours _____

Start-up Date _____

Date of Failure _____

Customer Complaint/Issue Being Addressed

Air Leak
 Oil Leak
 Electrical
 Air End
 Component Malfunction

Resolution/Repair Performed

Materials/Labor/Mileage Reimbursement

*All non-PneuTech supplied parts used on warranty claim must have receipts/invoices submitted as proof of purchase.

Qty	Part Number	Description	Price Ea.	Total	Approval/Denial	Authorized Total
					<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
					<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
					<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
					<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
					<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
					<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
		Labor	\$75.00/hr		<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
		Mileage Number of Trips _____	\$1.00/mile		<input type="checkbox"/> Approved <input type="checkbox"/> Denied	

Approved By: _____

Date: _____

Requested

Approved