

WARRANTY CLAIM FORM

Official Use Only

Reference # _____

Date: _____

Tech: _____

****IMPORTANT****

STEPS FOR WARRANTY CONSIDERATION



1. Claim form must be **COMPLETELY** filled out.
2. Serial number **must** be provided.
3. Original parts are warranted for 1 year from date of purchase from dealer,
4. **All defective parts must be returned to the factory with this form. Part assemblies must be complete or credit may be denied.**

RETURN PART FREIGHT PRE-PAID TO:

Ram-Lin, 2136 East Fourth Street, Orlando, FL 32824

5. All claims are subject to evaluation and will be reviewed for clarity of content.

**** If any of these steps are not followed warranty consideration will be delayed or denied.**

Submitted by: (Company requesting reimbursement) Please Print

Date: _____

Name: _____ E-mail/Fax: _____

Company: _____ Phone: _____

Address: _____

Phone & Fax: _____

Service Company: Check if same as Submitted by

Name: _____ E-mail/Fax: _____

Company: _____ Phone: _____

Address: _____

TRAILER Information MANDATORY:

Serial No. of Trailer being serviced: _____

End-user: _____

(Explanation of issue)