



Warranty Claim Form

1 CLAIM NR*	2 CLAIM TYPE*		3 MACHINE*	4 SERIAL NR*	5 HOURMETER*	DATES		
	Machine part <input type="checkbox"/>	Spare part <input type="checkbox"/>				6* MACH SOLD dd / mm / yy	7 FAILURE* dd / mm / yy	8 REPAIR* dd / mm / yy
9 MACHINE OWNER Customer Name Address City/Country				10 SERVICE PROVIDER* Provider Name Address City/Country				
11 PARTS REPLACED / LABOR PERFORMED*						TENNANT OFFICE USE ONLY		
Note: Retain defective parts until our final approval. We may request return for inspection.								
Part Nr	Description	Return Part	Qty	Part cost	Labor Hours	Reason for non processing: Notification Parts Labor		
		No						
		No						
		No						
		No						
		No						
		No						
Total:								
12 PART CAUSING FAILURE* Important: for spare part claim, sales order number of failed part is needed: date of delivery:								
13 DESCRIPTION OF DEFECT / TROUBLESHOOTING PROCEDURE / HOW YOU SOLVED PROBLEM*						Damage code		
						Done by:		