

Warranty Claim Form



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1 CLAIM NO.		2 CLAIM TYPE		3 MACHINE	4 SERIAL NO.	5 HOURMETER	6 FAILURE DATE		7 REPAIR DATE		8 WARRANTY START	
		<input type="checkbox"/> MACH	<input type="checkbox"/> REPAIR				/ / m m d d y y		/ / m m d d y y		/ / m m d d y y	
9 MACHINE OWNER						10 SERVICE PROVIDER						
Customer Name Address City/Country Contact Name Contact Phone						Account No. Provider Name Address City/Country Contact Name Contact Phone PO / Inv No.						
11 PARTS REPLACED / LABOR PERFORMED											12 AUTH NO.	
Note: Retain defective parts until our final approval. We may request that they be returned for inspection.												
Part No.	Description	Return Part	Qty	Part Cost	Labor Hours	Labor rate /hr	Labor Cost					
		Y <input type="checkbox"/> / N <input type="checkbox"/>										
		Y <input type="checkbox"/> / N <input type="checkbox"/>										
		Y <input type="checkbox"/> / N <input type="checkbox"/>										
		Y <input type="checkbox"/> / N <input type="checkbox"/>										
		Y <input type="checkbox"/> / N <input type="checkbox"/>										
		Y <input type="checkbox"/> / N <input type="checkbox"/>										
Trip/Travel	Description	Mileage			Hours	Trav Cost						
Travel	Trip/Travel to Customer Site											
				TOTAL								
14 PART CAUSING FAILURE												
Part No.	Description	Comment										
15 DESCRIPTION OF DEFECT / TROUBLESHOOTING PROCEDURE / HOW YOU SOLVED PROBLEM												

Equipment

Notification

Credit Memo No.

Mfg Ship Date

App Type
WA ☐ PA ☐ GW ☐

Approved By

Approved Date

Please email completed form to WARRANTYCLAIMS@TENNANTCO.COM

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To receive credit, please submit claim form and return requested parts within 30 days of repair completion. For additional information, refer to claim processing instructions on My Tennant website.