

ALTERNATOR & STARTER WARRANTY RETURN FORM

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WARRANTY RETURN FORM 1380 AB Weesp The Netherlands Diagnosis of the appearance of the Alternator or Starter can be an effective method of determining the conditions under which it was operating. With the results of the diagnosis it is possible to identify the cause of the problem Please fill out this form as complete as possible. Alternator or Starter complaints without this (filled out) form can not be taken into consideration. Date (dd-mm-yy) 1 General information Name Address Country Contact person Tel. No. E-Mail 2 Vehicle & AC Compressor data Vehicle information Part information Maker Part number Model Production code Model year Instalation date Engine + code Removal date VIN Number Installation mileage Removal mileage 3 Problem description Alternator Starter Yes No Yes No Fault indicator light on Starter working Loading Starte switch working Battery condition ok? Ignition switch working Wiring and connectors ok? Wiring and connectors ok? Battery condition ok? Noise External damage External damage Brief description of the trouble Under what conditions did the trouble occur? How did you remark the trouble Weather conditions Outside Temperature Who fitted the Unit Other information or comments: = minimum required information needed for a correct investigation by DNEU - Technical Service