

metelli

WARRANTY CLAIM REQUEST

CUSTOMER INFO

COMPANY NAME\NAZWA FIRMY: _____

CONTACT PERSON\OSOBA KONTAKTOWA: _____

TEL.: _____ FAX: _____

E-MAIL: _____ CLAIM N°\NR REKLAMACJI _____

VEHICLE INFO*

FIRST REGISTRATION DATE\DATA PIERWSZEJ REJESTRACJI: _____

CAR MAKER\MARKA SAMOCHODU: _____

MODEL: _____

CHASSIS IDENTIFICATION N°\NR PODWOZIA: _____

DISPLACEMENT (CM3)\ POJEMNOSC: _____ KW: _____ FUEL\PALIWO: _____

ENGINE IDENTIFICATION N°\NR SILNIKA: _____

GEARBOX TYPE\SKRZY尼亚 BIEGÓW: _____ ABS (TAK/NIE): _____

* Copy of the car registration document in alternative\ LUB KOPIA DOWODU REJESTRACYJNEGO

PRODUCT CLAIM INFO

METELLI PRODUCT REFERENCE\INDEKS TOWARU: _____

ASSEMBLED ON DATE\DATA MONTAZU: ____ / ____ / ____ AT KM: _____

DISASSEMBLED ON DATE\DATA DEMONTAZU: ____ / ____ / ____ AT KM: _____

CLAIM DESCRIPTION\POWÓD REKLAMACJI: _____

DAMAGES REQUEST\INNE USZKODZENIA(TAK/NIE): _____ IF YES, €KOSZTY: _____

DAMAGES DESCRIPTION\OPIS USZKODZEN: _____

STAMP AND SIGNATURE\PIECZATKA I PODPIS

DATE\DATA

PAY ATTENTION: this form must be completely filled in, for each part of it, and it is binding to request the technical analysis of each single product of Metelli Co. with a warranty claim request and eventual damages request.

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