



LAMBDA SENSOR WARRANTY RETURN FORM

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Diagnosis of the appearance of the Lambda sensor 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. Lambda sensor 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. 1 E-Mail

2 Vehicle & Lambda sensor data

	Vehicle information		Part information
Maker	<input type="text"/>	Part number	<input type="text"/>
Model	<input type="text"/>	Production code	<input type="text"/>
Model year	<input type="text"/>	Installation date	<input type="text"/>
Engine + code	<input type="text"/>	Removal date	<input type="text"/>
VIN Number	<input type="text"/>	Installation mileage	<input type="text"/>
		Removal mileage	<input type="text"/>

3 Problem description

Diagnostic Trouble Code details (indispensable for proper diagnose)

DTC / failure codes

DTC's erased after installation new part ?

Used fuel Octane

	Yes	No	
Used fuel additive??	<input type="checkbox"/>	<input type="checkbox"/>	If Yes / info <input type="text"/>
Used oil additive?	<input type="checkbox"/>	<input type="checkbox"/>	If Yes / info <input type="text"/>
Used cleaner?	<input type="checkbox"/>	<input type="checkbox"/>	If Yes / info <input type="text"/>

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