



WARRANTY REQUEST

Warranty Tag

Date: _____

Customer Name (End User): _____

Address: _____

Location: _____

Dealer Name (BCFP Customer): _____

Address: _____

Location: _____

Phone: _____ Fax: _____

Contact: _____

Part Number: _____

Model Number: _____

Serial Number: _____

Manufacturer: _____

Date Installed: _____

Date removed: _____

Mileage / Hours: _____

Replacement Invoice Number: _____

Installed By: Dealer _____

Repair Shop: _____

End User: _____

Nature of Complaint - Please Explain Fully

PLEASE DO NOT WRITE BELOW THIS LINE

Inspection Report and Comments: _____

Inspection Reported By: _____

Date Received @ BC Fleet: _____

Date Shipped: _____

Date Completed: _____

Warrantable: _____