



WARRANTY RETURN CLAIM FORM

TRIBE® OVERLAND CUSTOMER INFORMATION FOR WARRANTY

DEALERSHIP

CUSTOMER

DEALERSHIP
LOCATION

WARRANTY PAGE

CUSTOMER NAME

DEALER PURCHASED FROM

ADDRESS

DATE PURCHASED

STATE

CITY

ZIP

EMAIL ADDRESS

CONTACT CELL #

DMV (DEPARTMENT OF MOTOR VEHICLES) INFORMATION

DATE REGISTERED

LISC PLATE #

DMV SERIAL #

REGISTERED OWNER NAME

TRAILER INFORMATION

YEAR

MAKE

MODEL

TRAILER ID #

This is the VIN Number on the trailer

THE FOLLOWING DOCUMENTS MUST BE PROVIDED FOR ALL CLAIMS TO BE ACTIVATED

ALL THIS REQUIRED

- Original PURCHASE INVOICE
- Copy of DMV registration
- Picture of Warranty Part
- Picture of Trailer

EMAIL: support@tribetrailers.com

If the claim is related to an incident or an accident please note the warranty is for **MANUFACTURERS DEFECT** only.

- was caused in an incident or Accident
- was NOT caused in an incident or Accident

REPLACEMENT PART INFORMATION

PART #

DESCRIPTION

DEFECT
CODE

DEFECT CODE

BROKEN - B

WORN OUT - W

DAMAGED - D

Please explain the Nature of the Warranty Requested

Please read the complete warranty information in this book provided to the customer. Warranty is for 12 Months from date of purchase only. Manufacturers defects with exclusions due to the fact that this is under the customers control off-road.

For additional information and Warranty Policy, please visit our sites@ www.TRIBETRAILERS.com

Please not from time to time our information and product will be updated. We are not responsible for any misprint, please contact our customer care if you have any addition questions or concerns.