

# Parts warranty form



Customer name and address:

Claim number:

Date:

Account Number:

## Details of claim

QTY	Part number	Description of parts	Claim value (ex.vat)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Labour claim costs (for aftermarket goods only & must be accompanied by a labour invoice).

## Purchase details

Invoice number of original purchase:	<input type="text"/>	Date of purchase:	<input type="text"/>
Invoice number of 2nd purchase:	<input type="text"/>	Date of purchase:	<input type="text"/>

## Vehicle details

Registration number:	<input type="text"/>	Registration date:	<input type="text"/>		
Chassis number:	<input type="text"/>				
Make:	<input type="text"/>	Engine size:	<input type="text"/>	Current mileage:	<input type="text"/>
Model:	<input type="text"/>	Body type:	<input type="text"/>	Mileage elapsed between repairs:	<input type="text"/>

## Details of failure

Autodata labour time:

I understand and agree to the terms above. This claim as detailed above represents the total claim in respect of the goods returned.

Print name:

Sign:

Position: