

**NOTE: Warranty claims must follow the reverse path of sale. Seller may have additional warranty requirements.**

PSI will require this completed L001-05 Warranty Request Form for warranty consideration. Send completed form to Seller.

**NOTE:** Should PSI require the return of parts, a Return Material Authorization (RMA) number will be issued by PSI. This RMA number must accompany any returned components and be visible on the packaging.

**PLEASE NOTE REQUIRED FIELDS (\*):** Images below show Component Information Locations. Insufficient or inaccurate information could delay or deny warranty process.

### COMPONENT INFORMATION LOCATIONS

(NOTE: some legacy product information locations may be different than image examples.)

*COMPONENT PART NUMBER:	See <b>A</b> Example
*SERIAL NUMBER (WHERE APPLICABLE):	See <b>B</b> Example
*MANUFACTURING DATE CODE:	See <b>C</b> Example



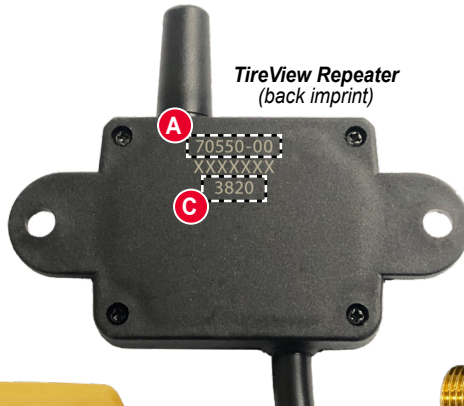
*P.S.I. Control Box  
(outer top label)*



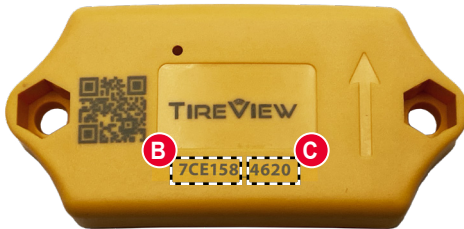
*P.S.I. Control Box Lid  
(inside top label)*



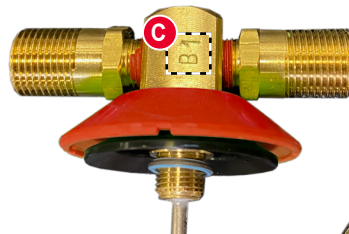
*TireView Cap Sensor  
(top imprint)*



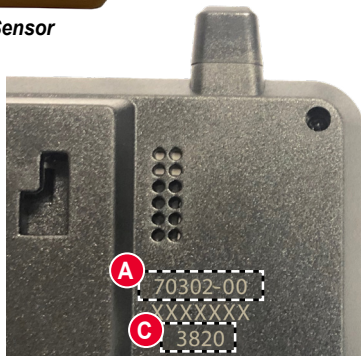
*TireView Repeater  
(back imprint)*



*TireView Internal Sensor  
(top imprint)*



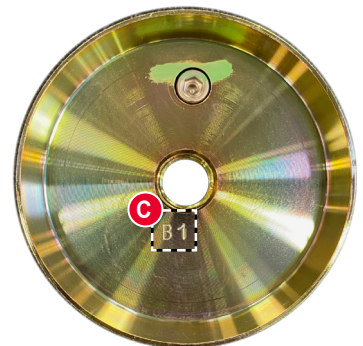
*P.S.I. Thru-Tee  
(die stamp)*



*TireView Display  
(back imprint)*



*P.S.I. Stator  
(die stamp)*



*P.S.I. Press Plug  
(die stamp)*

SELLER:	
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# Warranty Request Form

Refer to L001-01 P.S.I. Warranty Statement for Terms and Conditions.

FOR P.S.I. USE ONLY			
P.S.I. RMA #:		NOTES:	
P.S.I. CONTACT:			
WARRANTY DISPOSITION:	CREDIT ISSUED      SENT PARTS      DENIED		

**PLEASE NOTE REQUIRED FIELDS WITH ASTERISK (\*):**  
 Insufficient or inaccurate information could delay or deny warranty process.

VEHICLE INFORMATION			
*VEHICLE MANUFACTURER:		*IN-SERVICE DATE (mm / dd / yyyy):	
*VEHICLE IDENTIFICATION NUMBER (VIN):			
SYSTEM INSTALLER:		*INSTALL DATE (mm / dd / yyyy):	
VEHICLE OWNER/FLEET NAME:			
VEHICLE OWNER UNIT NUMBER:		VOCATION:	

COMPONENT INFORMATION (SEE EXAMPLE COMPONENT INFORMATION LOCATIONS ON PAGE 1)	
*COMPONENT PART NUMBER:	<b>A</b>
*SERIAL NUMBER (Mark N/A when not applicable):	<b>B</b>
*MANUFACTURING DATE CODE:	<b>C</b>

For additional Part Number information please reference the following Parts Manuals:

- T002-01 P.S.I.® Parts Manual
- T005-01 TireView® Parts Manual
- T013-01 TireView® LIVE™ Parts Manual

REPAIR INFORMATION			
*REPAIR FACILITY:		NAME:	
PHONE NUMBER:		EMAIL:	
WORK ORDER NUMBER:		COST OF REPAIR:	
		*LABOR:	*PARTS:
*FAILURE DATE (mm / dd / yyyy):			
ODOMETER READING:		MI	KM

*DESCRIPTION OF OCCURRENCE PLEASE RETAIN SUSPECT PARTS FOR RETURN TO P.S.I. IF NEEDED.	
DIGITAL PICTURES AVAILABLE:	NO      YES (IF YES, PLEASE ATTACH TO EMAIL WITH THIS FORM)
COPY OF WORK ORDER AVAILABLE:	NO      YES (IF YES, PLEASE ATTACH TO EMAIL WITH THIS FORM)

Please complete form and click **“SAVE”** button at bottom of page to save a copy to your computer. Then attach the saved PDF to email and send to [warranty@psitireinflation.com](mailto:warranty@psitireinflation.com).