

## WARRANTY CLAIM

Processing Claims for all Putzmeister Products.

FOR	FAC	TOF	₹Y	USE	ONLY

**CLAIM NUMBER** 

CLAIM DATE	
DATE OF FAILURE	

			aded areas on this report! Failure to utomatically constitute a denial of thi		alsification of any	DATE OF FAILURE (mo./day/yr.)		
1	OWI	NER I	DENTIFICATION	E-MAIL:				
NAME:_			ADDRES	3S:				
CITY:			STATE:		PHONE:			
2	PROD	UCT	IDENTIFICATION	Product Serial No.				
Product M	lodel No	)			Pump	ing Hours		
3		LAB	OR HOURS					
Qty.			Description of di	agnostic/repa	ir process			
4	P	ART	SCLAIMED			authorized repairs claimed by a copy of the invoice.		
Part Num	nber	Qty.	Description		Replaced On Invoice No.			
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<u> </u>								
<u> </u>								
5 REA	ASON	I FOF	R CI AIM Describe In Detail					
5 REASON FOR CLAIM Describe In Detail  (Provide Additional Details on Separate Page)								
Return to:	E-mail: v	varranty@	Dputzmeister.com Please con	tact PMA's Cus	tomer Support Group	Putzmeister America, Inc		
	Fax: 262-321-6803 wit			h questions at 8	800-890-0269.	1733 90th Street Sturtevant, WI 53177		
FORM - A810208 Printed in U.S.A.								