

GENERATOR WARRANTY SERVICE CLAIM FORM

GENERATOR LOCATION						WINCO DEALER PERFORMING WORK					
OWNER						NAME					
ADDRESS						ADDRESS					
-											
DATE OF PURCHASE:		DATE IN USE:		DATE OF FAILURE:		PHONE:					
DATE:	ATE: CUST #:					MODEL #:					
CASE #:	#: RMA #:					SERIAL #:					
GENERATOR APPLICATION						GENERATOR HOURS:					
COMMERICAL			CONSTRUCTION		M-SPEC #:		JOB #:				
RESIDENTIAL			RENTAL								

COMPLAINT (Enter the original customer complaint when claim was initiated.):

CAUSE (Describe the failure accurately, completely, and factually.):

CORRECTION (Briefly describe the repair made.):

PARTS AND LABOR CHARGES									
				REQUESTED					
PART #	QTY	Y DESCRIPTION						TOTAL	
								\$	
								\$	
FREIGHT								\$	
LABOR		HOURS @ \$					TOTAL	\$	
MILAGE		MILES @ \$					TOTAL	\$	
TOTAL CLAIM REQU							EQUESTED	\$	
SUBMITTED BY							*IF YOUR ACCOUNT HAS NET INVOICING TERMS, YOUR ACCOUNT WILL BE CREDITED. IF		
TITLE	<u>SUBMIT</u>						NOT, A CHECK WILL BE ISSUED.		