

# Warranty Claim Form



Absolute Customer		Equipment Brand	
Contact Name		Equipment Model	
Phone Number		Equipment Serial Number	
Email Address		Engine Brand	
Date		Engine Model	
Original Repair Date		Engine Serial Number	

**Original Repair** *Please provide a description of the original repair, repair date, and what Absolute Parts were installed.*

**Failure** *Please provide a description of the current failure. (Loss of Power, Overheating, etc)*

**Cause** *Please provide your assessment for the cause of failure (Turbocharger failed sending debris through engine, etc)*

**Correction** *Please provide a complete detail of what repairs were performed to correct failure (R&R Turbocharger with new)*

**Labor**

Labor Rate \$	Hours of work performed	Total Labor Claimed \$

**Parts Used for Repair**

Part #	Description	Qty	Price	Ext Price
			Total	