

Kenworth Northeast OTC FAILED PARTS WARRANTY REQUEST FORM



**A SIGNED COPY OF ORIGNAL INVOICE MUST ACCOMPANY THIS REQUEST. **

CUSTOMER ACCOUNT#				KWNE Use Only
CUSTOMER'S NAME	-			RO#
CONTACT PERSON				CLAIM#
CONTACT PHONE #	-			Approved Date
CUSTOMER'S EMAIL ADDRESS				Rejected Date
ORIGNAL INVOICE #				
REPLACEMENT INVOICE #				
DATE PART WAS PURCHASED				
DATE PART WAS RETURNED				
PART NUMBER FOR WARRANTY CO	NSIDERATION			
REASON FOR RETURN (PLEASE BE S	SPECIFIC, CAUSE OF FAILURE)			
COMPLETE 17 DIGIT VIN #				
YEAR	MAKE	MODEL		_
ENGINE MAKE	ENGINE SERIAL #			
MILEAGE AT INSTALLATION	HOURS AT INSTALL			_
CURRENT MILEAGE	CURRENT HOURS			_
KENWORTH EMPLOYEE'S NAME				
CUSTOMER REQUESTED PART	(S) RETURNED IF CLAIM IS REJECTED BY	YES		NO
PACCAR. ** CUSTOMER AL	JTH. RETURN FREIGHT CHARGES. **		Customers	<u>s Initials</u>
CREDIT DISPOSITION	CUSTOMER REQUESTED CREDIT TO A CUSTOMER REQUESTED REPLACEMENT			
CUSTOMERS SIGNATURE			DATE	
TAKE PART	TS AND COMPLETED PAPERWORK TO SERVICE I	DEPARTMENT	TO HAVE CLA	IM SUBMITTED

*** NOTE ALL WARRANTIES ARE SUBJECT TO OEM APPROVAL ***

** PART CLAIMS CAN TAKE UP TO 120 DAYS FOR APPROVAL **

*** ITEMS TO BE CONSIDERED FOR CLAIMS ARE TO HAVE THIS FORM FILLED OUT COMPLETELY, A COPY OF THE ORIGINAL INVOICE, THE INVOICE TO BE CREDITED AND THE PART TAGGED ***