



Radiator Warranty Claim Form

Dealer / Repairer Name: _____

Contact Name: _____

Phone No: _____

Part No: _____

Invoice No: _____

Part Description: _____

Date installed: _____

Date Failed: _____

Vehicle Make: _____

Model: _____

Year of Manufacture: _____

Kms/Hrs: _____

Reason for claim: (Please be explicit etc - this will speed up the processing of your claims
"Not Working" is insufficient information).

Official Use Only

CR #:

Date: / /

Received by: