



SHELBOURNE REYNOLDS ENGINEERING LTD - WARRANTY CLAIMS FORM (UK ONLY*)

Dealer and Branch:
 Service Manager:
 Customer Name:
 Customer Address:

 Postcode:

Claim Number:
 Claim Date:
 Serial Number:
 Installation Date:
 Failure Date:
 Repair Date:

Description of fault found and action taken*: **(One fault per claim please)*

Shelbourne Reynolds Engineering Service Personal Only:

Date Received: _____
 Parts Received: _____
 Comments:



WARNING!
 Warranty Form claims to be submitted within 15 days of repair. SRE will hold all warranty claims if the machine registration document has not been returned to us.

QTY	PART NUMBER	PART DESCRIPTION	INVOICE #	A/R	UNIT PRICE	DISC %	EXTEND

Non SRE Part Cost*: _____

**Purchase Invoice Must Be Provided*

Labour Hours:	_____	Labour Rate:	_____
Mileage Claimed:	_____	Mileage Rate:	_____
Hours Accepted:	_____	SRE Warranty Rate:	_____
Mileage Accepted:	_____	SRE Mileage Rate:	_____

IMMEDIATELY RETURN ANY FAILED HYDRAULIC, ELECTRICAL OR DRIVELINE COMPONENTS TO SRE - HOLD ALL OTHER PARTS FOR 30 DAYS AND AWAIT INSTRUCTIONS FROM SRE

Claim Filed By:
 Position:
 Email:

Parts Total:	_____		
	Carriage: _____		
	Labour: _____		
	Mileage: _____		
Total Claim:	_____		
Approved By:	_____	Approval Date:	_____
C/N Number:	_____	Date Issued:	_____