



## Warranty Application Form

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|                                                                                                             |  |  |                        |
|-------------------------------------------------------------------------------------------------------------|--|--|------------------------|
| <b>Service provider</b><br><b>Address</b><br><b>Zip code/ City</b><br><b>Contact Details</b><br><b>Date</b> |  |  |                        |
|                                                                                                             |  |  |                        |
|                                                                                                             |  |  |                        |
|                                                                                                             |  |  | <b>Tel/ email</b>      |
|                                                                                                             |  |  | <b>Invoice Number:</b> |

|                                                                                                                                                                                                                |       |    |                              |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----|------------------------------|--|
| <b>Vehicle Owner</b><br><b>Brand &amp; Tyoe of vehicle</b><br><b>Year/ License plate</b><br><b>Original Equipment</b><br><b>Mounting- Demounting</b><br><b>Mileage (Start &amp; end)</b><br><b>Type of use</b> |       |    |                              |  |
|                                                                                                                                                                                                                |       |    |                              |  |
|                                                                                                                                                                                                                |       |    |                              |  |
|                                                                                                                                                                                                                | Yes   | No |                              |  |
|                                                                                                                                                                                                                | Date  |    | Date                         |  |
|                                                                                                                                                                                                                | Start |    | End                          |  |
|                                                                                                                                                                                                                |       |    | <b>Banden:</b> Tire pressure |  |

|                 |       |       |    |    |    |    |         |
|-----------------|-------|-------|----|----|----|----|---------|
| <b>Position</b> | L1    | R1    | L2 | R2 | L3 | R3 | Reserve |
| <b>Rim type</b> | Steel | Alloy |    |    |    |    |         |

|   | Qty. | Tire size | Product | DOT & Serial No. | Tread depth |
|---|------|-----------|---------|------------------|-------------|
| 1 |      |           |         |                  |             |
| 2 |      |           |         |                  |             |
| 3 |      |           |         |                  |             |
| 4 |      |           |         |                  |             |
| 5 |      |           |         |                  |             |

| <b>Description of the complaint</b> |  |
|-------------------------------------|--|
| 1                                   |  |
| 2                                   |  |
| 3                                   |  |
| 4                                   |  |
| 5                                   |  |

Material damage

☐ Yes☐ No

Signature:

Personal injury

☐ Yes☐ No

Failure to complete the form may cause delays.

The undersigned declares that he has filled in the above truthfully and gives permission to cut  
if investigation so requires and that the tyre(s) may be disposed of as waste in the event of rejection  
or granting the warranty application, if they are no longer usable.