



P.O. Box 59, Highway 9 West Cresco, IA 52136

Phone: 800-446-1407 Fax: 563-547-5366

www.alumline.com

WARRANTY CLAIM FORM

Date: _____

Customer Name: _____

Address: _____

Phone Number (daytime): _____

Email Address: _____

Type/Name of Product: _____

VIN Number: _____

Date Purchased: _____

Type of use: _____

A. Description of problem or repair needed:

B. Does the customer have warranty papers on file at Alum-Line?

C. Is the problem/repair covered by Alum-Line warranty? Yes _____ No _____

1. Has the customer already had repair done without prior approval?

Yes _____ NO _____

Why?

Amount of Bill \$ _____

Total Labor Hours _____

Parts Total \$ _____

Labor Total \$ _____

2. Will the customer need to come to the factory for repair, or do we need to do further inspection here at the factory?

Yes _____ No _____

Reason:

D. Does the customer have a repair estimate and/or have they provided pictures or proof of the repair?

1. Does the customer have a repair estimate?

Yes _____ No _____

Fax or email a copy of the estimate. Pictures may be required.

There will be a warranty allowance if the work has been authorized at an outside repair facility (allow \$45/hour shop rate, parts/material at OUR costs or supplied by us). Hours and rates for work are based on the work being done at our factory. We are not obligated to reimburse for warranty work that was neither pre-approved nor authorized and performed at an outside repair facility.

The customer must turn bills into the factory after they can show proof of payment from the repair shop. Only the customer will be reimbursed for payment, not the repair shop unless previously authorized by Alum-Line and it is an authorized repair facility.

ALL WORK MUST HAVE A SCHEDULED APPOINTMENT ARRANGED WITH THE FACTORY PRIOR TO WORK BEING DONE.
THE CUSTOMER CANNOT EXPECT WORK TO BE DONE WITHOUT NOTICE.

Please send this form to the attention of your Alum-Line Sales Representative.

Alum-Line, Inc.
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Cresco, IA 52136
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