

## WARRANTY CLAIM

Date:

Claim number:

Dealer : Street: City : Email :		User: Street : City : Email :				
Type of machine : Serial number : Hours worked :			Delivery date : Date of failure :			
Description of failure						
Part number Description		Quantity G	ross price (ea) Discour	nt Total price net	Awarded	
				%		
				% %		
				%		
				%		
				%		
				% %		
Labor for repair		Hours	Unit price	Total		
			Total claim :			
To be completed by manufacturer Schouter	n Machines B.V					
Request granted	Arrangement		Total amount awarded :			
Yes Yes, based on leniency No	Credit note Return defective parts					
Comments manufacturer:		Treatment number :				

The warranty claim must be submitted by email within 1 month after the reparation date. Any warranty claim should be filled in completely and clearly readable. Defective parts must be returned to us free of charge.

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