

TSE WARRANTY CLAIM REQUEST



1. All items/boxes marked * must be completed in full and returned to Transpecs.
2. Any outwork must be approved prior to any work being carried out under warranty.
3. Labour invoices with a completed copy of this request to be returned to Transpecs within 5 days of the date of repair.
4. All replacement parts subject to this claim required by Transpecs must be returned within 14 days. Failure to submit all the required information and parts will result in an invoice being raised to cover costs of replacement parts, labour, transportation, and/or any other costs involved. Please also see Terms and Conditions.

| | | | | | |
|--|--------------|---|------------------------|--------------------------------|-------------|
| Company*: | | | | Warranty no. *(Issued by TSL): | |
| Contact*: | | TSL acc. no.*: | | | |
| Delivery address*: | | Phone no.*: | | Part no/s.*: | |
| | | Email: | | | |
| Claim description* (or full report and/or photo's attached): | | | | | |
| Outwork repairer: | | Date of repair: | | Transpecs authoriser: | |
| Contact: | | Phone no.: | | | |
| Truck brake system*: | Conventional | Load sensed | Trailer brake system*: | Conventional | Load sensed |
| | ABS | Load sensed | | ABS | Load sensed |
| | EBS | | | EBS | |
| Date part originally fitted*: | | Number of axles*: 1 2 3 4 | | | |
| Date of failure/repair*: | | Suspension: air spring | | | |
| Kilometres travelled*: | | Brake type*: disc drum | | | |
| Vehicle manufacturer*: | | Trailer type*: drawbar semi | | | |
| VIN number*: | | Date of registration*: | | | |
| ECU serial number: | | | | | |
| Notes: | | | | | |
| TSL internal use only | | Claim declined | Hold | RCN number/s | |
| Signed: | | Claim approved WU | Scrap | | |
| Date: | | Claim approved WR | Return to cust. | | |