

Parts Warranty Information Sheet

Date:/ F	Parts Associate:	Bran	ıch:	
Alltrux: Yes No		Alltrux out of box claim:	Yes No	
Alltrux Damaged or part number recevied in Fusion				
Alltrux Original Purcha	ase Order Number(i	f available)		
Alltrux Reason for clai	m:			
How are we refunding	Customer?			
If part is denied is the	customer willing to	o pay return freight?		
Customer Number:				
Customer Name:				
Address:				
City:	State:		_ Zip:	
Failed Part Number:				
17 Digit VIN:Red	quired for all claims	Engine Serial Num	ber:	
Original Purchase Date	e:/	Original Invoice Number:		
Miles at Purchase	Required for All Cla	Miles at Replacement	Required for All Claims	
eplacement Purchase Date:// Replacement Purchase Invoice Number:				
Complaint of Failure, Eng	jine Fault Code, and T	roubleshooting Followed:		
Cause/Failure Reason:	:			
Engine Hours	Required	Required for MX Claims		
Customer Signature:_		Print Name:		