



## WARRANTY REQUEST FORM

CUSTOMER DETAILS			
CUSTOMER NAME:		ADDRESS:	
PHONE:		EMAIL:	
COACH/BUS/TRUCK DETAILS			
MAKE:		MODEL:	
CHASSIS NO.		ENGINE NO.	
MILEAGE:		REGISTRATION NO.	
VIN PLATE NO.		DATE OF MANUFACTURE:	
DEALER DETAILS			
DEALER NAME		CONTACT	
PHONE		EMAIL	
ADDRESS		DATE OF REQUEST	

WARRANTY OVERVIEW	
DESCRIPTION OF DEFECTS	
SUPPORT AND JUSTIFICATION DOCUMENTS	<i>Please attach photos of defects and LSHS VIN plate on the body and any supporting documents or justifications</i>
WARRANTY POLICY	LSHS Warranty Policy attached with form

SIGNATURE		DATE	
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