

WARRANTY REQUEST FORM

to be sent by email to: warranty@at-repair.aisin-europe.com

COMPANY

Name _____

Address

Date _____

Contact person _____

Telephone Number

E-mail address

AISIN PART DETAILS

Part Number _____

Part fitted to car YES NO

YES C

NO

VEHICLE DETAILS

Make _____

VIN
.....

Model

Engine Fuel _____

Year manufactured _____

Engine Displacement (cc)

Registration No. _____

Engine Code

HISTORY OF PART

Date fitted _____

Mileage fitted (miles/kms)

Date removed _____

Mileage removed (miles/kms)

DESCRIPTION OF FAULT - what/where/when/who/why?

APPEARANCE

- Warning light
- Noise
- Oil loss
- External damage
- Shock
- Slip
- No gear change
- No advancement

TRANSMISSION REPORT

- P
- R
- N
- D
- 1
- 2
- 3
- 4
- 5
- 6
- 7

DEFAULT CODE**FREQUENCY OF THE PROBLEM**

- Permanent
- Rare
- At random
- Other

TEMPERATURE**DRIVING CONDITIONS**

- Hot (>80°)
- Cold (<80°)
- Hot and Cold

- Flat
- Highway
- Climb
- All
- Descent

MODE**SPEED (KM/H)**

- 4WD
- Comfort
- Sport
- All
- Hybrid

Date**Signature**