

To: Construction Equipment & Parts GmbH / CEP LLC
 After Sales Service Department
 P.O. Box 282580
 Dubai
 United Arab Emirates
 Tel: +971 (0)4 3417432
 Fax: +971 (0)4 3417433



From (Customer, Agent): _____
 Phone No: _____ Fax No: _____
 Page No ____ of ____
 Total number of pages of claim: _____

Warranty Claim

1. Product specifications

Type of Equipment _____ Constr' No _____ Constr' year _____
 Operating hours _____
 Current location of Equipment _____

Date of commissioning _____ Date of Damage _____

2. Description of damage

Please describe damaged parts and state their Part No

Quantity	Unit	Name of the damaged part	Part Number

Please note the possible reason for the failure of the above mentioned parts

3. Replacement & Delivery of the new parts

a. Replacement of damaged parts to be taken from the Customers own stock (to be replenished ASAP)?

b. Replacement of damaged parts by ordering and shipping from CEP After Sales Service Department?

Means of Shipment (by courier, air or sea freight): _____

Delivery address _____

Information for a Proforma invoice: _____

Replacement work to be carried out by customer Yes No

Replacement work to be carried by CEP Yes No

Estimated working time (hrs) _____ Estimated additional costs _____

 Date Name of claimant Signature Company
 (Please print)

4. For Internal use only (to be filled out by CEP)

Subject to warranty Yes No

If yes issue a Warranty Claim No: WC/200 /

If No, give reasons: _____

Return of damaged parts by: _____

Name of Authorized CEP employee (please print) _____

Signature of Authorized CEP employee _____ Date _____