

Warranty / Policy	V . O . R .	SAFETY CRITICAL/ ADR RELATED
Warranty <input type="checkbox"/>	YES <input type="checkbox"/>	YES <input type="checkbox"/>
Policy <input type="checkbox"/>	NO <input type="checkbox"/>	NO <input type="checkbox"/>

Section K overleaf MUST be completed in full

WARRANTY / POLICY CLAIM REPORT REQUEST

PLEASE CONTACT BODYLINE BEFORE COMMENCEMENT OF ANY REPAIRS UNDER WARRANTY SECTIONS B AND C TO BE COMPLETED BY CUSTOMER. SECTIONS A, D-K INTERNAL USE ONLY

A | Warranty Details - Internal Use Only

Date	Original Body/Order No.	Job No.
	Claim No.	
Job Title		
Raised by		

B | Customer Details

Customer	Address	
	Suburb	Postcode
Customer Contact	Postal Address	
	Telephone	Facsimile
Originator	Contact Telephone	Date

C | Order Details

Description of Product	Fleet Number	Date into Service	Registration Number
VIN	Failure Date	Odometer Reading	Date In
Claim Item / Complaint			
1			
2			
3			
4			
5			

D | Corrective Action - INTERNAL USE ONLY

Corrective Action
1
2
3
4
5

E | Budget Costs - INTERNAL USE ONLY

Summary of Budget		Budget Costs by Line Item			
Material Cost		Description	W/C	Labour (h)	Material
Consumable Cost		Item 1			
Labour Cost			98		
Freight Cost		Item 2			
			98		
Total Cost Incurred (excl GST)		Item 3			
<i>Less Recoverable Cost</i>			98		
Net Total Cost (excl GST)		Item 4			
			98		
		Item 5			
			98		
		Subtotal (hours)			
			98		

NOTE: Refer Section L for invoice details of recoverable costs

F | Approval to Proceed - INTERNAL USE ONLY

Authorised by:	Sections G - L Overleaf
Date:	

