

WARRANTY CLAIM FORM

NOTE: Incomplete Claims Cannot Be Processed

Work Order/Repair Order #		REPAIR DATE:		
DEALER INFORMATION:		CAREFREE DEALER NUMBER		
Name:		Contact:		
Address:		City:	State:	Zip:
Phone:	FAX:		Email:	
CUSTOMER INFORMATION:				
Name:		Original Owner:	☐ Yes	□ No
Date of Purchase:				
Vehicle Make:	Vehicle Mo	odel:	Ve	ehicle Year:
Carefree Arm Hardware Serial #:		Carefree Arm Ha	ardware Part #:	
arefree Roller/Fabric Serial #: Carefree Roller		Fabric Model #:		
DESCRIPTION OF MANUFACTURER'S DEF	ECT			
Complaint:				
Cause:				
Correction:				
Flat Rate Labor Time (From Carefree Flat	: Rate Manual):			(Hour)
Carefree Approved Dealers Labor Rate:	-	\$		(per Hour)
Total Labor Amount for Claim:	- -	\$		
REPLACEMENT PARTS NEEDED				
Part Number		Description		
Part Number		Description		
Part Number		Description		
Part Number		Description		

At the time the authorized warranty order is placed by Carefree, a warranty labor authorization number (AU#) will be issued. The AU# is valid for 60 days from date of issue unless special arrangements are made with Carefree prior to expiration.

For labor reimbursement, the servicing dealer has 60 days from the date of issue of the AU# to submit a copy of the signed work order to Carefree; the work order must reference the AU#. Labor cannot be paid until Carefree receives a copy of the signed servicing dealer work order.

All warranty authorizations are provided in writing via email or through www.e-carefree.com. No verbal authorizations are accepted or provided.

Submitting this claim constitutes an agreement to the terms and conditions of the Carefree warranty policy and guidelines. Carefree warranty and policies can be found in "070000-009 Book 9-Warranty" available on-line at www.e-carefree.com

Email the completed form to Carefree at <u>warranty@carefreeofcolorado.com</u>. Include supporting documentation (i.e. pictures, videos, documents).

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