

Warranty Claim Form

PLEASE EMAIL THIS COMPLETED FORM TO: warranty@cumminscleantech.com

Date Submitted

Total Claim

Warranty Authorization #

Service Provider-							
Service Center Name		Contact Name		Repair Date	Repair Date		
Mailing Address		Phone/Ext.		Additional Repair	Additional Repair to Authorization #		
Phone Number		Email					
Vehicle Information	on ———						
17 Digit VN #		Model	Model		CCFT Serial#		
Year		Mileage	Mileage		System Type		
Make		In-Service Date	In-Service Date		In-Service Date		
Repair Informatio	n						
Repairs Made							
Parts Replaced	Part #	Part Description	Qty	Serial#	Unit Cost	Total	
SRT for Repair							
					Claim To	tal	
				SRT Claim			
			1051 Republic Drive, Suite 200, Roanoke TX 76262				
		Phone 1-888-CNG-TANK		Other Claim			