

Mailing: P.O. Box 1160 St. Joseph, MO 64502-1160

Shipping: 505 Hwy. 238. Elwood, KS 66024

Ph: (785) 989-3000 Fax: (785) 989-3077

Warranty Claim Number

Dealer:					Date:		
Dealer:			Customer:				
Address:			Customer:				
City, State, Zip:			City, State, Zip:				
Model: Seri  (A) Description of Failure		Serial Number:	Cust				
		Failure Date:		Hour Meter F	Reading:		
(B) Corrective Action Taken		Repair Date:					
Problem Part	Number:	Problem Part	(mfg.) Serial Nu	mber:			
Quantity	Part Number	Description	Unit Cost	Total Cost	Snorkel Invoi	ce Number	
Certify that the		eon is accurate. Unless otherwise shown, s action by representatives of Snorkel.	services described wer	— e performed at no char	rge to owner. Records to	o support the	
Certify that the validity of this  Important Note Attach a copy of Credit will be is Returned parts	e information contained here claim are available for inspect.  e: of work order for repair to sued only following inspect. must be accompanied by	eon is accurate. Unless otherwise shown, s	orkel Warranty Dep	artment.			
Certify that the validity of this  Important Note Attach a copy of Credit will be is Returned parts	e information contained here claim are available for inspect.  e: of work order for repair to sued only following inspect. must be accompanied by	ection is accurate. Unless otherwise shown, section by representatives of Snorkel.  This claim when submitting to the Snection and disposition by factory of degree y packing list copy of this claim form.	orkel Warranty Dep efective parts return	artment. ed prepaid within 45	days from date of fa	ilure.	
Certify that the validity of this  Important Note Attach a copy of Credit will be is Returned parts Please refer to	e information contained here claim are available for inspect.  e:  of work order for repair to esued only following inspect must be accompanied by claim number on all attains.	ection is accurate. Unless otherwise shown, section by representatives of Snorkel.  In this claim when submitting to the Snection and disposition by factory of degree y packing list copy of this claim form. In the characteristic shows a communication of the shows a communicati	orkel Warranty Deperective parts return	artment. ed prepaid within 45 ite in the section b	o days from date of fa	iilure. se only.	
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Certify that the validity of this  Important Note Attach a copy of Credit will be is Returned parts Please refer to	e information contained here claim are available for inspect.  e:  of work order for repair to esued only following inspect must be accompanied by claim number on all attains.	ection is accurate. Unless otherwise shown, section by representatives of Snorkel.  In this claim when submitting to the Snection and disposition by factory of degree y packing list copy of this claim form. In the characteristic shows a communication of the shows a communicati	orkel Warranty Deperentive parts return  Do not wr Dealer C	artment. ed prepaid within 45  ite in the section b  Code:  Code:	o days from date of fa	se only.	

Freight \$\_\_\_\_\_

8230189

Misc.

Total Credit \$

RMA # \_\_\_\_\_

CM#