



Form Instructions:

- This form must be completely and correctly filled in by the dealer or the owner.
- This form must be signed by the owner or an authorized agent using the product before consideration will be given to the claim. Invoice #:
- Email completed information to Warranty@TrackmanTracks.com and include pictures of the failed wheel(s).

Dealer claim #: _____

Date: _____

Owner's last name (please print)		First name M.I.	
Street			
City	State	Country	ZIP code
Owner's telephone number - including area code			
<i>I/WE hereby certify the statement of facts herein to be correct. I further certify that the only claim arising from the used merchandise described in this claim is for replacement of the merchandise and that no personal injuries, property damage or other loss is involved.</i>			
X _____ Owner or Agent's signature			

Dealer or store through whom claim is presented

Street & number

City, state & ZIP code

Name of employee preparing claim form

Dealer's telephone # - including area code

Dealer's fax # - including area code

Wheel application (please mark "X") _____ Agricultural _____ Construction

Date of wheel failure

Wheel type

Date wheel purchased

Machine year Machine serial number

Part Number	Wheel Position	Wheel Age	Wheel Hours	Describe the Wheel Condition
1				
2				
3				
4				

Special Information:
